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M. ADELAIDE NUTTING

AS KNOWN BY FRIENDS, STUDENTS AND CO-WORKERS

I

BY JAMES E. RUSSELL

Dean, Teachers College

WHATEVER TEACHERS College has been able to contribute to the nursing profession is due in the first instance to Mrs. Hunter Robb and Miss Nutting. They first brought to my attention the deplorable state, educationally considered, in which even the best of training schools found themselves twenty-five years ago. They made clear to me the possibility of advancement through better teaching, and they dared Teachers College to undertake the task of providing better teachers for schools of nursing. On the principle

that we could afford to try almost any project once, I yielded to the blandishments of these representatives of the nursing profession. As I recall it, the agreement was that Teachers College would admit annually six students who

should be selected by the officers of the American Association of Superintendents of Training Schools for Nurses. At

RICH ARE the stores of wisdom which Miss Nutting will continue to pour out to her profession, but it is fitting that, with the severance of her official connection with Teachers College as teacher and administrator, some acknowledgment of the indebtedness of the nursing profession should be set down for posterity. Those who have written the following appreciations of her remarkable influence are well aware that time alone can give the proper perspective for the evaluation of a great life and they know, too, that the figure of Miss Nutting is one which will increase in stature with the years.

any rate, the organization had a most formidable name — presumably thus insuring proper selection of candidates — and the admission of students was limited to the number that the College might receive without disturbing its equilibrium.

Looking backward over the years that have intervened, one may well ask what force has been working to increase the enrollment, scope and influence of this depart-

ment. In number, the enrollment has grown from six to almost as many hundreds in a year; the scope of the work has increased to include not only the training of teachers of nurses, but also the whole educational program of the

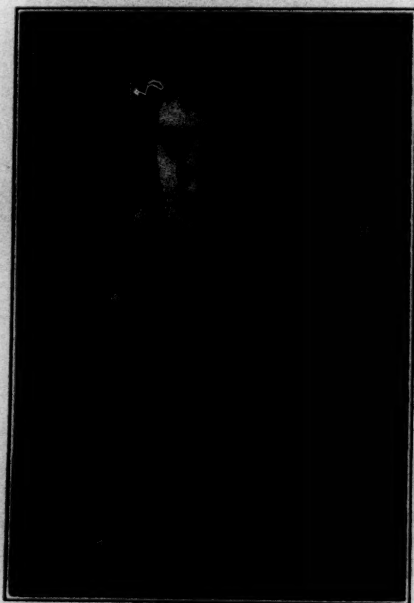
profession; and the influence of the undertaking is now world-wide. In my judgment, the chief credit for leadership must go to her who has directed the undertaking from the beginning. She has had able assistance at her command, the generous financial support of Mrs. Helen Hartley Jenkins, and splendid coöperation from those in the field; but day in and day out, week in and week out through the years, she has been both mother and nurse to the infant

prodigy. Her devotion to the cause, her insight into its needs, and her extraordinary ability to inspire in others confidence in her ideals have served both to forward the work and make it respectable and respected everywhere. Doubtless nursing will continue to advance in professional attainment, but whatever the superstructure that may yet be built, its strength can not be greater than that of the foundations laid by Adelaide Nutting.

II

BY GEORGIA M. NEVINS, R.N.

IN THE autumn of 1889, the year in which the School for Nurses was established, there arrived at the Johns Hopkins Hospital from Canada a



M. ADELAIDE NUTTING—A SOCIETY GIRL

thoughtful young woman of dignity and charm, of intelligence beyond the average in our midst, and with a personality which quickly impressed itself upon her classmates. Adelaide Nutting was never especially robust, but she managed to hold her own physically with the strongest during the long hours of work in those early days. She was deeply interested, was faithfulness itself in the tender care of her patients and one of our happiest memories is of the evenings when we were never too weary to discuss enthusiastically hospital details that for the moment seemed of the utmost importance. Most of us were content with things as they were, but very early began for Miss Nutting that wonderment and questioning which have never ceased, and it is not yet possible to estimate what they have meant to American nursing.

Miss Nutting was graduated in 1891 under the superintendency of Isabel Hampton, later Mrs. Robb. They were warm friends as well as teacher and student, and what the Johns Hopkins



THE HEAD NURSE

School owes to its first superintendent is another story of absorbing interest.

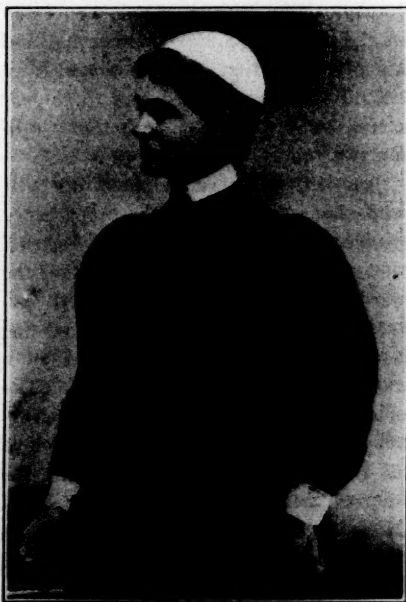
After graduating, Miss Nutting remained on for two years as head-nurse in different wards, and in 1893 when Miss Dock resigned, she was appointed Assistant Superintendent of Nurses. A year later Miss Hampton resigned and Miss Nutting became the Superintendent of Nurses and Principal of the School, holding that position until called to a professorship in Teachers College, Columbia University, in May, 1907.

Only those who knew her intimately realized with what hesitancy, with what a sense of unpreparedness, what doubts of her own ability, the new superintendent of the Johns Hopkins School faced her responsibilities,—the more because of her already clear sighted recognition of the fact that schools of nursing were

not meeting their obligations. She attacked her problems with characteristic thoughtfulness and courage. Her standards of efficiency were of the highest, and in addition to the daily administration, often beset with difficulties, she constantly devoted herself to the development of the School as an educational institution.

During the first year she devoted herself to working out carefully plans for certain important changes which had been advocated by Miss Hampton, and early in the year 1896 she established simultaneously the three-year course of training, the eight-hour day for student nurses and abolished the monthly money allowance to students.

Then followed, year after year, a succession of advances and reforms. Tuition fees were made a requirement;



THE SUPERINTENDENT

substantial scholarships, twelve in number, were provided; loan funds were built up for the needs of students. Lecturers had hitherto been expected to give their services; now in several subjects they were paid and the foundation was thus laid for a system of salaried lecturers and instructors. Courses of instruction were enlarged, and the beginnings of laboratory work appeared for the first time in such subjects as Physiology and Bacteriology.

The motive for lengthening the course of instruction to three years was conscientious to the last degree and the intention was to give further opportunity to the student nurse, to make the third year one of specialization and development, not to make use of her service to the hospital without abundant return. For obvious reasons nearly every school in the country adopted the three-year course. Miss Nutting was disappointed in the working out of this scheme and has often said that it was doubtful if we should have established the three-year course until we had made better use of the two years.

Another important change in 1901 was what was known as the preparatory course, providing six months' instruction of the students before entering the wards of the hospital. It proved successful: and though rearranged as seemed advisable, it has served as a model for many other schools. The efficiency of the practical work was developed, and a gradual systematizing of all the methods was possible with the help of the able assistants selected by Miss Nutting—this happy faculty being recognized the world over as a qualification of the successful executive.

A very permanent memorial will be

the unique library of reference books and of rare works on the history of nursing and of hospitals which she collected with so much enthusiasm and untiring energy. It was while collecting this material that the need of a History of Nursing was so impressed upon her that she began that work which was later carried out in collaboration with Miss Dock.

From the beginning Miss Nutting took a prominent part in all matters pertaining to nursing organizations. In Maryland she was the leading spirit in forming the State Society of Graduate Nurses in 1903, and the passage of the excellent bill for the regulation of nurses was largely due to her influence and counsel. She was twice president and for some years secretary of the Society of Superintendents, and always one of its most active members. She was also president of the American Federation of Nurses, the organization through which our first international relationships were established.

In later years Miss Nutting came to the conclusion that little real progress in the education of nurses could be hoped for until two radical reforms in the existing system could be brought about. These were the provision of endowments or other financial resources for schools of nursing, which are as a rule now totally dependent upon hospitals for everything,—and the separation of such schools from the hospital ownership and control which now almost universally prevails. These ideas are set forth in various papers and addresses, and in particular in a monograph on the Educational Status of Nursing published in 1912 by the U. S. Bureau of Education. In 1914, she set the

machinery moving in the Johns Hopkins Nurses' Alumnae Association to build up an endowment fund for the School of Nursing, and gave very generously to the fund.

Only those closely associated with Miss Nutting can realize the effort and anxiety involved in each new departure in training school methods. It is quite likely that her pupils sometimes found the superintendent unduly austere; but that manner was an inheritance in our day, and beneath her apparent severity

they would inevitably discover sympathetic interest in their welfare, a willingness to spend and be spent, and an always inspiring and generous helpfulness.

Miss Nutting is endowed with qualities which fit her preëminently for any line of work to which she might have set her hand. An inquiring mind, a dogged persistency and courage in the face of difficulties, rare industry—with the highest ideals—have combined to make her a leader in the nursing world, which delights to do her honor.

III

BY LILLIAN D. WALD

MEMORIES of incidents and people are most clearly defined when they are associated with the beginnings of one's life—whether it be chronological life or the life of interests more vital than the personal. Adelaide Nutting, because of the interest she expressed and the fellowship she offered to us when we were young and untried and were embarking upon our venture, occupies a unique position in the memories of those of us who were especially interested in the origin and development of public health nursing. I recall Adelaide Nutting's almost immediate intellectual questionings and her eagerness to share with "her children" in the training school, knowledge of what we were about, resulting in an invitation to visit Johns Hopkins and to tell the students about it. Most precious of all was the opportunity afforded by that visit to sit in front of Adelaide Nutting's fireside for discussion and debate. A vivid memory remains of the hospitality, warmth, friendship, and aesthetic quality of that setting.

The first precious contact with Adelaide Nutting has developed into a friendship that has grown closer and more tender through the years that have followed. Whether we were giving a new slant to the nurse as an instrument of service, or whether as young idealists we were embarking upon important or unimportant voyages, did not matter to her. Then, as always, however, what did matter was Miss Nutting's eagerness to have women, and particularly women who are nurses, intellectualize and think about their responsibilities, and their progress. Her unmatched fervor has worked to stir the mind to read, to inquire, and to think, in order that independent and dignified action might follow. This concept of education is rarely combined with the sensitive social conscience.

I do not think that Adelaide Nutting, intellectual and teacher that she is, has ever believed that education, through university, lecture, literature, or organization, is of consequence to the nurse, except as a guide to the development of her relationship to the patient, to the

institution, to the pupil, and to the community.

Smaller minds, not truly scholarly, may see education as a thing apart from life, something Olympian, but the true philosophers of education measure its value by its power to put training into action.

What profits the thinking power if it be not turned into life and into the

life that we are to lead and help others to live?

The value of the stimulus that Adelaide Nutting has given to me cannot be measured here, and I know that the trend of the entire nursing profession has been vitally influenced by the vigor and clarity of her modern mind and her respect for sound traditions of tender service in the profession of nursing.

IV

BY ISABEL M. STEWART

Teachers College, Columbia University

SOME ONE has said that his definition of a liberal education was Mark Hopkins at one end of a log and a student at the other. I should say that my idea of a rich educational experience is living in the next office to Miss Nutting, because Miss Nutting is one of those "born" teachers who lets no occasion pass without illuminating it and plucking out its significance. No one with even a moderately receptive mind could live anywhere near her and escape this stimulating educational experience.

It is difficult to say just what it is in certain people that gives the unmistakable impression of power and distinction, but everybody will agree that Miss Nutting's personality has this impressive and dynamic quality. Few realize, however, how many sides there are to the real Miss Nutting, how much warmth and color and gaiety there is mixed up with all her splendid intellectual qualities, how much there is of the artist and the woman and the citizen-of-the-world combined with the administrator and teacher. It is this richness and many-sidedness in her personality that make association and friendship

with her such a fascinating adventure.

People will always be inclined to speculate on whether such a personality is "born" or "made." Whatever may have been added by environment and education there can be no question that Miss Nutting's native endowment was an exceptionally generous one. When she regrets, as she often does, that she did not have the advantages of a college education in her earlier days, her college-trained friends, with their Ph.D's, smile skeptically, because they know that no college education and no unusual educational advantages of any kind, could ever have produced her amazingly fertile and creative mind or her indomitable will or driving energy. Wherever she might have been placed in life, she would have been a pathfinder, she would have beaten down the obstacles in her way and would have won through to the top. Moreover she would have brought others with her, for, like Arnold of Rugby, she would not "alone conquer and come to the goal leaving the rest in the wild." It was never a single path she blazed out, it was a highway for all who could follow.

It was fortunate for nursing that Miss Nutting chose this pioneer field and threw into it all her youthful enthusiasm and her rare gifts of mind and spirit. Her early interest in nursing education was undoubtedly fostered by her close association with Mrs. Robb, Miss Dock and other able women in the field. But it was not long before she was readily acknowledged as a leader in her own right, and was busily engaged in surveying new territories and driving forward new paths into the educational wilderness of thirty years ago.

It is a great temptation to dip into that early history and to trace the daring experiments and the constructive achievements in training school work which we owe to her clear vision and to her conquering spirit. But it is the later period which I have been asked to write about, not the historic facts about Miss Nutting's work at Teachers College which all members of the profession know by heart, but some picture of the Chief herself as I have known her during the past seventeen years.

My first impression as a student was that of a very stimulating and helpful person who asked penetrating questions and made you want to do things you had never dreamed of before. I have heard sometimes of students who could never quite overcome a paralyzing sense of awe and "nothingness" in Miss Nutting's presence. Perhaps the stimulus was too great or the questions too searching. Certainly the great majority of people of all kinds and conditions, who come in contact with Miss Nutting draw power and inspiration from her. Many of them come back to her again and again whenever they find their own batteries running low, to get new

strength and courage from her unfailing supply.

It is this amazing vitality as well as the fertility and range of her mental processes which seems to me the most outstanding thing about this leader of modern nursing. Rarely, indeed, does one find a mind so continuously active and at the same time so resourceful and productive; a mind that is at home in so many of the realms of thought, in literature and history, in philosophy and politics, as well as in her own familiar fields of nursing and education. It is a marvellously quick and penetrating mind and yet of the digging sort, always probing below the surface of things, always questioning, always throwing out lines and pulling in from books, from people and from every chance experience of life, the facts and materials which it needs for its creative work. The rest of us may read the same books and papers, hear the same lectures and bump up against the same experiences, but we do not seem to penetrate far enough to reach the treasure which she finds. She would have shone in research, if she had ever had time to settle down to it because she belongs unquestionably to the small group of inveterate truth-seekers, or "lie-chasers," as Sinclair Lewis calls them in "Arrowsmith."

Miss Nutting has not only a more penetrating vision than most of us, but she has a much longer range of vision. When any event or tendency appears in the present, she instinctively searches back into the past to find its origins and just as instinctively reaches forward into the future to trace its effects. This explains her intense interest in nursing history and also the fact that she is

often able to predict future developments because of her close study of the general drift of contemporary movements.

But this historian has never been merely a passive observer of history. She has had a large share in the making of modern nursing history, and in the shaping of our future. The fact is, that she has usually been years ahead of the great body of nurses in her thinking. By the time we have caught up with her in one new line of thought she is forging ahead, surveying another path, with all the adventurous spirit and courage of the true pioneer.

Few people are more interested in traditions than Miss Nutting and more respectful of the past and all it has won for us. But she has none of that sentimental attachment to tradition which insists on the preservation of ancient landmarks even when they stand directly in the path of progress. No tradition is too sacred to be challenged, and if necessary, demolished, to make way for better things. Many builders have a jealous regard for their own works and resent any suggestion of change by others. Nothing distresses Miss Nutting more than to find an old idea of hers passing from hand to hand without any effort to adapt it to changing needs and conditions. In the same way although she believes in system and in regulation, she has little use for routine and red tape and is apt to be very impatient if she finds even her own rules applied too arbitrarily.

While essentially a liberal and a progressive in her thinking, she has very little use for the noisy agitator or the wordy reformer who spends her energy in talk and does not get down to hard

practical work. No one is more relentless in exposing all kinds of glittering "bunk," or in puncturing professional "wind-bags."

But though she despises humbugs and does not "suffer fools gladly," no person ever came to Miss Nutting sincerely asking for help and advice without finding it. She has a keen sympathy for the searcher and she has the rare quality of intellectual generosity. She will "lend her mind" to any person or to any project, no matter how small, if she feels that there is a real need there and a desire to honestly face facts. With the slow and painful efforts of her students and assistants she is often marvellously patient and helpful, though it is difficult to hold her Pegasus to the pace of the ordinary fumbling and halting mind. Nothing gives her more joy than to find a mind that is really stirring and showing signs of independent thinking. She is like a mother when her youngster first starts off on his own legs, or like a nurse rejoicing over the first wobbly steps of her convalescent patient.

As a critic, she is refreshingly direct and discriminating though perhaps a little too outspoken for people of very tender sensibilities. Her penetrating and reasoned analysis of a paper or a report is always most illuminating and helpful. Along with the challenges and queries and pungent comments which strew the margin, will always be found generous words of encouragement, constructive suggestions, and liberal contributions from her own wide knowledge and experience. She has none of the selfishness of the scholarly hoarder or the jealousy of associates which mars the work of so many able leaders.

Miss Nutting has always had the keenest interest in the growth and progress of her assistants and students, indeed she has usually been far more ambitious for them than they have been for themselves. While no one of them ever quite measures up to her high standards of ability and service, they know that she will stand by them to the last if they do their part. She has little patience with shirkers or people who can't stick to a difficult job, but she is quick in her recognition of sincerity and courage, even when outstanding ability is lacking.

Her students and her younger assistants have often regretted that they could not see more of her and enjoy more of her teaching. They probably do not realize how small a margin of physical strength she has always had to come and go on, and how much of *that* she has had to spend in providing the means of life for her constantly growing college family. Only those who have been behind the scenes know what that struggle has been, how much thought and effort are involved in the building up of every new course, and in the opening out of new resources. Though she has not been able to know them all in recent years when the family has grown so large, it was their welfare she was thinking of and planning for every minute of the day and usually far into the night. And not their intellectual welfare only. No mother could be more deeply concerned about the health and living conditions of her family or more anxious to secure for them all the things which make for a rich and happy life. So far as she could, she has joined with them in their "good times," adding a note of distinc-

tion, of gracious dignity and playful humor to all kinds of college functions.

Miss Nutting is still too near for us to realize how rare a person she is and how much she has contributed to modern nursing. Anyone who has read Sir Edward Cook's "Life of Florence Nightingale" must have been struck by the many points of resemblance between these two leaders of nursing. It is not only a physical likeness. There is the same indomitable will, the same penetrating intelligence, the same creative genius, even the same weaknesses, for, of course, there *are* weaknesses, the defects of those strong qualities which go to make forceful and dominant leaders. Certainly, if there is such a thing as an apostolic succession in nursing, Miss Nutting is in the direct line of descent from Miss Nightingale and probably more than any other leader of this generation, is the bearer of her ideals and spirit.

Happily we have still our great leader and teacher with us and we shall look forward to many years of help and counsel from her. Freed from the pressure of active work, she will be able, we hope, to put into writing for a much wider group of students and friends, some of the gathered wisdom of these years of fruitful service and perhaps some of her visions of the nursing still to be.

I cannot think of any more appropriate tribute to her than that which Kipling has paid to his schoolmasters, even though the gender is wrong in this case:

And we all praise famous men—
Ancients of the College;
For they taught us common sense—
Tried to teach us common sense,
Which is more than knowledge!

This we learned from famous men,
Knowing not its uses.
When they showed in daily work—
Man must finish of his work
Right or wrong his daily work,
And without excuses.

This we learned from famous men,
Knowing not we learned it.
Only as the years went by,
Far from help as the years went by,
Plainer we discerned it.

Wherefore praise we famous men,
From whose bays we borrow,
They that put aside To-day,
All the joys of their To-day,,
And with toil of their To-day,
Bought for us To-morrow.

Bless and praise we famous men,
Men of little showing,
For their work continueth,
Broad and deep continueth,
Great beyond their knowing.

THE UNITED STATES PUBLIC HEALTH SERVICE

By LUCY MINNIGERODE, R.N.

THE HISTORY of the Public Health Service dates from 1798, when Congress passed an act for the relief of sick and disabled seamen. The service was designated as: The United States Marine Hospital Service. The benefits of this service were extended to officers and seamen of the United States Navy, by special act of Congress, from 1799 until 1811, when naval hospitals were provided.

A supervising Surgeon General was commissioned by the President in 1871 and assumed charge of the Service activities, the number of officers was increased, entrance examinations were required, and officers made subject to change of station. In fact, the requirements for officers of this service were made the same as for the Army and the Navy.

In 1902 the name was changed to Public Health and Marine Hospital Service because of important public health functions imposed on the service. Again in 1912 still further public health functions were imposed and the name again changed to United States Public Health Service.

When first established in 1798, the

Marine Hospital fund was obtained by imposing a tax of twenty cents a month on seamen employed on American vessels. This levy was collected by the Collectors of the Customs, and in this way the Service came under the jurisdiction of the Treasury Department, where it has remained ever since.

The evolution of the Public Health Service was along natural lines. The officers of the Service in giving care to seamen were often the first physicians to diagnose such diseases as cholera, yellow fever, smallpox, etc., which were being imported into the United States, particularly to the Southern ports as regarded yellow fever. During epidemics the Service officers were called upon to assist state and local health officials on authorization of the President in the fight against the spread of any disease, but it was not until 1878 that Congress authorized the use of the Marine Hospital Service in an extensive way as the Federal Health Service.

The act in 1878 was for the most part a quarantine act to prevent the introduction of contagious and infectious diseases into the United States. In 1890 the Marine Hospital Service was

utilized as the Federal Health Agency for the prevention of interstate spread of disease.

The act of 1890 authorized the use of the Service for the prevention of the spread of four diseases only: cholera, yellow fever, smallpox and plague. In 1893 the powers of the Marine Hospital Service in this regard were extended to cover all infectious and contagious diseases.

In addition to hospital and quarantine functions, the activities of the Public Health Service include research and educational work.

The investigative functions began with investigation of such diseases as yellow fever and cholera in the early part of its existence, until in 1902 when Congress authorized the establishment of the Hygienic Laboratory. Since that time the Hygienic Laboratory has grown very rapidly until now it is one of the foremost research institutions of the world. It is equipped for carrying on many branches of scientific study for the benefit of mankind.

The functions of the Public Health Service as it stands today may be described as follows:

1. Protection of the United States from introduction of diseases from without.
2. Prevention of interstate spread of disease and suppression of epidemics.
3. Coöperation with state and local boards of health in health matters.
4. Investigation of diseases of man.
5. Supervision and control of biologic products.
6. Public health education and dissemination of health information.
7. Medical care of merchant seamen and other beneficiaries.

The Public Health Service is subdivided into seven divisions, each with an Assistant Surgeon General in charge

under the Surgeon General. These divisions are:

1. Personnel and Accounts.
2. Sanitary Reports and Statistics.
3. Scientific Research.
4. Foreign and Insular Quarantine.
5. Domestic Quarantine.
6. Marine Hospitals and Relief.
7. Venereal Disease Control.

The Personnel and Accounts Division is responsible for the personnel and the finances of the Service and the preparation of estimates for the basis of Service appropriations.

The Sanitary Reports and Statistics Division publishes weekly reports including vital and morbidity statistics not only in the United States but all over the world, reprints of special articles of interest to health officers and organizations, and articles on special and related subjects, which are available for those interested in and desiring such information.

The Scientific Research Division conducts scientific field and laboratory studies into the diseases of man and other public health problems. Among the diseases studied are anthrax, amebiasis, botulism, deer fly fever, hookworm, influenza, leprosy, malaria, meningitis, pellagra, syphilis and related diseases, trachoma, tuberculosis and typhoid fever.

Studies are also made in matters relating to child hygiene, industrial hygiene and wastes, public health organization and administration, sewage disposal, pollution of streams and excreta disposal.

In addition to these studies, the following work is being done: Demonstration work in rural sanitation; treatment of cases of trachoma in hospitals and field clinics for the purpose of

eradication and suppression of that disease; supervision of the manufacture and sale of virus, serums, toxins, and analogous products, including arsphenamine and neoarsphenamine in interstate traffic.

The Venereal Disease Division promotes coordination of state programs for control of venereal disease, prepares educational material in the form of monthly pamphlets and periodicals, stimulates the improvement and standardization of methods of diagnosis, treatment and control of venereal disease, and stimulates greater activity through the education of the public.

The Division of Marine Hospitals and Relief furnishes medical care and treatment to designated classes of beneficiaries. At the close of the world war, the medical care and treatment of ex-service men was imposed upon this division, which at that time operated twenty-three hospitals with fifteen hundred beds. There was no nursing service, no dietitians, aides, etc., and very limited facilities. Hospitals were taken over from the Army, Navy and civilian organizations, and at the end of three years, eighty-seven hospitals were in operation with full corps of physicians, dentists, nurses, dietitians, aides, etc.

On May 1, 1922, all hospitals for veterans were transferred to the Veterans' Bureau fully staffed and in operation, and the Public Health Service was left with twenty-seven hospitals, a bed capacity of three thousand, just double the number of three years previous. The Domestic and Foreign Quarantine Divisions have already been described.

The interest to nurses in this Service lies not only in the opportunities open

to them as workers, but in the immense amount of public health literature and material which may be had for the asking on practically every subject related to public health.

The Service is an advisory Service, and except in the case of the Hospital Service works largely in cooperation with state and local health agencies. It does not initiate public health work, but assists in state and county health programs. Its studies are made available in the form of reports to those interested in and desiring them.

The work is nation wide and of inestimable value to the civilian population.

PREVENT TYPHOID

One of the most reliable gauges of the up-to-dateness of any community, according to Doctor Fulton, is its record in regard to typhoid fever. "A decline in typhoid fever," he says, "indicates state and community activity, on the one side—protection of water supplies from pollution; protection of food supplies from contamination; care in detecting the presence of 'carriers' supplemented by personal intelligence on the other side.

"The State Department of Health safeguards every community in the State with all the means at its command, but there are unavoidable weak spots in every sort of defense. To offset these and to afford the security that nothing but individual immunization can give, the Department urges all persons who have not been vaccinated against typhoid within the last two years to be vaccinated at once, before the 1925 'typhoid' season opens.

"Typhoid is what we call a seasonal disease. It reaches a low ebb during the winter, starts up again in the spring, and reaches its peak in August or September. Vaccination against typhoid requires three treatments, one each week for three weeks. Each week it will take about five minutes of your time. The cost to you will be your physician's fee. The State Department of Health will supply the vaccine free of charge. The anti-typhoid treatment is a sure preventive if taken in time."—*Press Bulletin No. 36*, State of Maryland Department of Health.

THE MUSTARD PACK

By E. NORA NAGLE, R.N.

MUSTARD, AS a counterirritant, has long been used both by the medical profession and the laity. Easily obtained and easily applied, it has been used with good effect in the hospital and the home. The mustard pack is just one of the many methods—and a very good method—of applying mustard as a counterirritant. It is used in such conditions as (1) a beginning bronchitis, to relieve the congestion and resulting dyspnoea which is so distressing to the patient; and (2) to ward off an attack of asthma. Adrenalin is usually used with the treatment in this instance.

The treatment may be ordered to be given once or twice in the day for three consecutive days. It is rarely continued for any longer time.

The procedure of the treatment is as follows:

EQUIPMENT NECESSARY

1. Three rounded tablespoons of ground mustard (preferably from a freshly opened can).
2. A basin and hot water.
3. Two bath towels.
4. Two soft warm blankets.
5. Warmed oil or vaseline and cotton balls for lubrication of the skin.

METHOD

The mustard is mixed with ten ounces of hot water and stirred for two minutes. One bath towel is immersed in the solution and squeezed partly dry, placed in the warm basin and covered with a towel.

The equipment is carried to the bedside.

It is essential that the room be warm and free from drafts.

One blanket is folded under and over

the child, replacing the upper bed-clothes, which are folded to the foot of the bed.

The patient's garments are removed, except the diaper in the case of an infant. The skin is anointed well, but sparingly, with warm oil or vaseline.

The mustard towel is shaken out and is folded around the child's body from the armpits to the hips and well over the anterior chest. There must be no wrinkles or creases in this towel.

The patient is wrapped, excluding the arms, in the second blanket. The under blanket is then folded securely around the patient as in any pack.

The child remains in this position for fifteen minutes. During this time the skin becomes very red, but it must never be allowed to blister. The breathing usually becomes quieter during the interval.

At the end of the fifteen minutes, a basin of water, temperature 105 degrees Fahr., is brought to the bedside. The mustard towel is removed under the blanket covering, and the patient is well sponged with the water, is patted dry, and is wrapped again in the lower blanket. The bedding is drawn into place.

During the next half hour the patient very often sleeps. The color and breathing show marked improvement. At the end of the time, the child is removed from the blanket, is rubbed with warm alcohol or camphorated oil, is re clothed and left warm and comfortable.

The two following cases have just been in the hospital and are typical of

the results obtained from this treatment:

Case 1.—Margaret J., age thirteen, with a history of asthma, was admitted to the hospital for tonsillectomy. Two days after the operation the patient developed a broncho-pneumonia. The day following, the temperature was 103.2 degrees Fahr. Mustard packs were ordered twice in the day. The first pack was given at 8 p. m. The patient perspired freely during and after the pack. The cough seemed softer. The patient had a much more comfortable night, sleeping at longer intervals than the previous night. The response to the packs which were given in the next two days was the same. The temperature was 99 degrees Fahr, at the end of this time and the dyspnoea had gone entire-

ly. The patient was discharged convalescent.

Case 2.—Baby L. was admitted and diagnosed bronchitis. He was breathing with great difficulty and appeared very ill. Mustard packs were ordered Q. I. D. for the first day and B. I. D. for the second day. The progress notes on his history chart read on the second day, "Cough better, temperature normal, breath sounds rough," and on the third day, "Condition much improved, breath sounds clearer." The patient was discharged from the hospital on the seventh day, cured.

The many cases in which this simple therapeutic measure has been used with the same good effects has proved its value in checking the progress of respiratory infections.

THE VALUE OF THE NURSE'S CLINICAL RECORD

BY NAN H. EWING, R.N.

WE ARE all familiar with and proud of the reforms effected by the American College of Surgeons in its extensive hospital standardization program. It has included constructive, critical study of the case records in hospitals, and the resultant efficiency of the new system has been definitely recognized. The Bulletin of the College states the "reason for these records" (case records) "lies in their use to prevent and minimize errors in all clinical practice; to serve as a direct test of efficiency."

Dr. M. T. MacEachern, Director of Hospital Activities of the American College of Surgeons, has strikingly brought home to us many of the defects of our charts. Doctor MacEachern's active

interest in all matters that pertain to hospital efficiency is well known to the nursing profession. He is appreciated as one of our foremost advocates of higher education for nurses, and it is a privilege to present a message from him on the subject of the nurse's record:

I earnestly hope that you who are directing Schools for Nurses will continue vigorously to train your nurses in producing better and better bedside or clinical records on their patients. In my work of directing the Hospital Standardization movement of the American College of Surgeons my interest has been aroused in this matter and my attention directed thereto. Through our hospital representatives we have opportunity to observe these records in twenty-four hundred hospitals of the United States and Canada. A vast improvement has been noted during the past few years, which appears to be concurrent with the promoting

of higher educational requirements in the training school. Notwithstanding this, there is still room for much improvement.

A few years ago when we gave thought to this matter, practically for the first time, we found in one hospital that out of forty-four thousand filed records, almost thirty-eight thousand were useless. The data contained therein was indefinite, incomplete, irrelevant, and in many instances, I would almost venture to say, inaccurate.

The importance of the nurses' bedside or clinical notes has not yet been fully realized by the hospital, medical, and nursing professions. The nurse has a broader function than to carry out orders and attend to the physical needs of the patient. She must keep an ever watchful eye on the patient to make accurate minute-to-minute observations on the development, progress and course of disease during the twenty-four hours. The nurse is, so to speak, the third eye of the doctor, the ever watchful eye which is on the patient continuously, whereas the doctor sees the patient in more of an intermittent manner, through a brief visit once or twice a day as a rule. On his visit he can only formulate a proper bird's-eye view of the progress of his patient during the past twenty-four hours by a study of the repeated observations made and recorded by the nurse in his absence. Through such findings he is not infrequently influenced as to the course of treatment or procedure to be laid down, so far as the patient is concerned.

How very important it is, therefore, to have these observations made accurately and expressed comprehensively. That alone is one strong argument for a higher standard of education for nurses. Indeed, I would like to see every young woman who contemplates entering the nursing profession take a preliminary course in psychology and training of observation and judgment.

Occasionally we see the expression, "Pain in the abdomen." This is worthless as a statement because of its indefiniteness and incompleteness. Such a condition should be more thoroughly described thus: "A sharp intermittent pain in the right lower quadrant, in the region of the appendix, radiating towards the stomach." Information of that kind is valuable to the doctor. Again, we hear or see the expression, "The patient had

a pain in the chest." This, too, is useless to the clinician, but "The patient had a pain in the right side of the chest in line with the axilla, coming on after coughing," is practical, valuable knowledge for the clinician. A third familiar example: "The patient vomited," is also too indefinite; but when we say, "The patient vomited two and one-half ounces of bloody tinged fluid, shortly after eating," we will help the clinician in making his diagnosis. In other words, let us see that the symptoms or observations made are described as to how, when, where, etc. We cannot separate the nurse from the case history, the diagnosis, treatment or result obtained in any case that requires nursing care. We must recognize her as a reliable factor or agent in these processes.

Therefore, let those in authority teach and train their student nurses to observe accurately and express themselves comprehensively, so that the records of bedside or clinical observations made by the nurses may be a valuable part of the case history.

The value of the clinical record by the nurse in charge of the patient is four-fold. Its immediate value is most significant to the physician, and indirectly to the patient. Its later value to the patient, physician, and hospital, is not surpassed by the value to the nurse herself.

In the school of nursing we are justified in placing much stress on the educational value of clinical records, for the entire effort results in better service to the physician and his patient. To assist the nurse to make her chart accurate and useful to the physicians is the responsibility of the educational department. From a seemingly selfish standpoint, protection to the nurse is emphasized.

A student nurse will exhibit no greater interest in her records than is manifested by those directly responsible for the system. She must be taught the importance of the complete case record, and she must understand the

case record. She should develop a greater sense of responsibility in keeping her own record worthy of its companion sheets.

For practice work it has proven satisfactory to have junior or senior students examine and criticize the nurses' records that have accumulated in the preceding months. After a period of chart study and night duty experience, the nurse is qualified to offer constructive criticism and to profit by her sister nurses' mistakes. It has been found where such was the practice that there was a development of an unusual amount of pride in the keeping of clinical charts.

The efficiency rating of our nurses' records is based on four factors:

1. Expert observation.
2. Explicit statements.
3. Elimination of
 - (a) Non-essentials
 - (b) Abbreviations
 - (c) Unfamiliar technical terms
 - (d) Symbols
 - (e) Diagnostic statements
4. Economy
 - (a) Space
 - (b) Time

Expert observation, as we well know, is not developed simultaneously with the mechanical ability to chart. An outline to assist students to form the habit of making correct records on a series of signs and symptoms is very useful. The clinical notes of all our post-operatives are similar in outline. The nurse is required to report the temperature, pulse, and respiration at stated hours, as well as to observe and record the color, condition of pupil of the eye, etc. Memory training outlines are used in helping the nurse recall the important items to be reported on during and after a convulsion and other conditions.

We believe that we have a very clear

understanding of how the nurse is applying her theoretical training when we examine her clinical notes. If she records that the patient had a chill, external heat applied, we know that we have failed to put across some of the principles of good nursing.

Doctor MacEachern has reminded us that explicit statements are essential if the nurse's record fulfils its mission. The nurse who writes on the chart, "Patient coughs frequently," may believe that she has done her duty, but her information could have been easily conveyed to the physician by the patient. Hers is the technical task of recording for the benefit of the physician all that he is seeking to know that the patient is unable to tell.

Elimination of non-essentials and economy of time and space are interchangeable. We do not permit our nurses to use symbols; abbreviations are omitted, and the use of terms that would faintly suggest a diagnosis or prognosis is ruled out. The use of unfamiliar technical terms is discouraged. It is appreciated that the use of symbols and abbreviations was meant to save time. But abbreviating and symbolizing words are often attended by haste and indifference and can hardly be considered true economy.

Economy of space and time is always a factor in the value of a chart. The clinician is not interested in the fact that the ice cap was filled six or eight times a day. One chart that we examined bore this notation six hundred and forty times. The A. C. S. nurses' chart has thirty-six lines. As a line was used each time for this notation, the bulk of the chart was unnecessarily increased over seventeen pages.

The examination of fifty records surprisingly revealed that the information supplied by the nurse could have been condensed into half the paper space used. The greatest extravagance was in the omission of lines and taking up space with non-essentials.

Many faults of omission were conspicuous. Many charts were examined that had only a single notation for the day. The case was chronic and apparently there was nothing to report. Several notations should have been made on the chart as a protection to the nurse who is entrusted with the care of the patient. The record that has only one or two notations in twenty-four hours would not offer much protection to a nurse if she attempted to prove in court that she had exerted reasonable care.

Economy of time and space is further made possible by special charts for special departments. The puerperal record that outlines the items to be reported on for a normal puerpera, the special chart for the new born, weight chart for metabolism cases, behavior charts for mental cases, are examples of time-savers that present the desired information in a minimum amount of space. The historian is usually interested in the economy of space in the files. It is wise to remember the limitations of these charts.

The charts of the nurses should be examined by the supervisor of the floor as she examines any other piece of practical work. Case records have long been used by the medical profession as adjuncts to teaching. If we are to be recognized as a reliable factor in clinical accountancy processes, we have a high privilege and a constant obligation to fulfill.

Mr. Mitchell, who has given us that useful book, *Hospitals and the Law*, sounds another warning:

From the legal point of view it is highly important that the maximum of care be exerted in the keeping of complete and accurate hospital records. Dereliction in this matter by the officials and attendants to whose hands this duty is committed is fraught with imperilment and may lead to disagreeable eventualities. It is not possible to foresee when these records may become important; one case is of as much moment as another in this regard, and the slightest negligence or carelessness or indolence is reprehensible to an extreme degree. A considerable duration of time, even years, may elapse before they become of consequence. A defect or mistake in one part may destroy the evidential weight of the whole record, for an imperfect record is inadmissible. For this very reason it is important to keep this in mind, and to be extremely careful at all times and in all cases.

The case records of twelve patients (industrial cases that were settled out of court) were examined and submitted to a lawyer for criticism and estimate of the legal value of the records. As these records were filed before this institution was rated by the American College of Surgeons, the doctors' records were not up to the present standard, but the nurses' records in each case consisted only of a series of reports on practical nursing care.

In one case we knew that great effort had been exerted to prove that the patient was conscious upon arrival at the hospital. The interne had seen the patient an hour later and had failed to mention that the patient was semi-conscious. The desired information was also lacking on the nurse's chart.

A short time ago the superintendent of a certain institution received a complaint from a woman who had recently been discharged from the maternity

department. In her denunciation of the hospital the former patient complained that, due to the nurse's carelessness, her baby had developed a skin disease. She stated that the nurse had told her that it was a heat rash which would soon disappear. Upon investigation of the case it was found that there was no notation on the nurse's record of the slight rash, and that the interne had completed his record by the statement: "Mother and babe discharged; condition good." The significance of the omission of the simple facts was more apparent when it was learned that this baby had developed a fatal skin infection at home two weeks after the mother's discharge. Nevertheless, the mother will always be certain that the hospital was responsible for her baby's death.

A new era has dawned in the keeping of hospital records. Guesswork is rapidly passing out of the scheme of things. It is plainly the duty of a hospital to require accurate, definite records from every department. Obviously, the nurse's records will continue to be of much importance and will be improved considerably. They will doubtless reflect the value of our higher education which is concerned with the scientific as well as the custodial care of the patient.

The College of Surgeons constantly makes the scientific care of the patient a dominant note in its activities. Professional nursing, the modern nursing and the idealistic type of care that we are seeking to give by better preparation, is concerned also with scientific care; such a purpose differentiates the profession from the trade. A commercial house organ carries this slogan: "The practical man knows how, the the-

oretical man knows why, and the successful man knows both."

The value of the nurse's clinical records to the student is stressed again and commented on at length in the Report of the Committee for the Study of Nursing Education. As this book is concerned primarily with nursing education and the influence of education on nursing, it will be well to review a few of its comments:

* * * the possibilities inherent in the method of case study which should be an integral part of her training. In order that the nurse may appreciate the medical treatment and participate in it intelligently without in any way impinging on the domain of the physician, it would appear that she should be acquainted with the patient's records, medical and social, so far as these are available from diagnosis to end result, whatever it may be. Instead of the monotonous repetition of minor duties now often continued long after skill has been acquired, there would be real intensive teaching of a small number of cases.

The teaching value and its effect are exemplified in the following:

Thus, for example, at a small hospital where the supervision of students on the wards is of unusual excellence and the student service is supplemented by an adequate graduate staff, case records are regularly used in teaching.

I was much impressed, writes an investigator at this hospital, by the students' intelligent knowledge of the patients. In studying the diagnosis, the student gave a brief resumé of the treatment and the general condition of each patient in a manner which showed her to be unusually well informed and interested in the clinical side of her experience.

Many of the errors of clinical chart practice have been remedied, but those responsible for the teaching of nurses will find ways and means of utilizing the case records as educational factors. It is a plan comprehensive in its scope, for it fosters the progress of all that it touches.



FAIRVIEW, THE ROOMY OLD NEW ENGLAND HOUSE

FAIRVIEW, THE VACATION HOUSE AT ROWLEY, MASSACHUSETTS

BY ISABEL CHIPMAN, R.N.

TAKE A train at the Boston and Maine Station, Boston, travel north about thirty miles, and you will come to the old New England town of Rowley. That is to say, you arrive at the station, —the town itself is two miles distant, for in the early days of railroad construction when Essex County was being surveyed, the conservative folk of Rowley would have no such new fangled contraption passing through their village.

If the Fairview car is not there to meet you, take Grady's Ford and drive to the Nurses' Vacation House for twenty-five cents, bags and bundles included. Arriving there you find a delightful old house, rambling and commodious, of the type that has added to itself as occasion required.

There are eighteen rooms and a sleeping-porch for guests, five bath rooms, a large living room with piano, a smaller room for quiet reading and writing, a big cheery dining-room, kitchen and servants' quarters, and a small suite for the hostess. The capacity of the house is eighteen, but on certain festive occasions it has showed remarkable powers of expansion. The sleeping porch takes care of several; when one is in the open, floor space is not important.

Fairview was made possible through the generosity of Mrs. Lawrence Carteret Fenno, of Boston and Rowley. Mrs. Fenno has long been interested in nurses, and two years ago proved that interest by the gift to the nurses of Massachusetts of this fine house, fully

furnished, its seventeen acres of land, and a substantial sum of money towards its maintenance. Mrs. Fenno's hope that such a house would be used and appreciated has been abundantly fulfilled.

Since its doors were opened on June 6, 1923, it has entertained over six hundred guests, whose visits have varied in length from over night to two weeks.

Although a majority of the guests are residents of Boston or its vicinity, there are on the pages of the guest book the names of women from Czecho-Slovakia, France, England, Switzerland, Lithuania and distant parts of the United States and Canada. Boston is a city to which many young women come from all parts of the world for instruction in nursing and public health work. At Thanksgiving and Christmas the jolly parties at Fairview have done much to cheer the nurse who finds herself at such times far from home and kindred.

The superintendent of one of the large nursing schools of Boston speaks of the special service the house renders the student nurse who, far from home and not too well supplied with money, needs to get away for vacations or during convalescent periods.

HOME PRODUCTS

Eggs, vegetables and chickens are all of home production. There is a large and growing poultry farm on the place. This spring, chickens have come out of the incubator and from under the motherly hens at an astonishing rate. So there are many chicken dinners in prospect. The hens are of the Rhode Island Red family, and lay eggs of that warm brown shade dear to the heart of the New Englander. They seem to

understand what is expected of them and attend so diligently to business that there are plenty for the table the year round, and often a guest returning to town takes with her a dozen or two of "strictly fresh" at just a trifle below the market price, for it is all in the family.

There is a well cared for and productive garden. From the time when the first asparagus pokes out of the ground, until the harvesting of the winter squash, vegetables and fruits in abundance supply the table and fill the jars on the shelves of the "Treasure Closet" with all sorts of good things for winter use. There is a fine strawberry bed and willing pickers are never lacking for its luscious fruit. In the orchard one finds apple and pear trees bearing. Quince, cherries and peaches are asking for just a little more time. Blueberries abound in the fields about Rowley, and the beach plum with the piquant flavor that makes such a deliciously different jelly flourishes like the green bay tree.

With all this thought for the creature comforts, Fairview does not overlook the aesthetic side; flowers grow as well as potatoes. The bulbs sent to hospital patients, that usually go to the ash can when their blossoming is over, are being saved by the nurses for Fairview planting.

WAYS AND MEANS

One of the first questions asked by a newcomer is, "How far are we from the shore?" Well, we are just three miles, and you can almost see Plum Island, famous for its clam-bakes, as it stretches its twelve sandy miles from Ipswich to Newburyport. The car, christened "Ways and Means" by the nurses (Means in honor of the donor, Doctor Means, and Ways because of its peculiar



THE HOMEY COMFORT OF FAIRVIEW

mannerisms), takes parties to the sea for an all day picnic and salt water bath.

The famous "North Shore" of Boston is within easy motoring distance of Rowley. Newburyport, on the Merrimac River, a quaint New England town with some notably fine examples of Colonial architecture, is just nine miles away. Be sure to visit Gloucester, beloved of artists, and if it is not profane to mention cod fish in the same breath, the home of the famous Gorton Pew Fisheries. Speaking of cod, the Sunday morning fish balls at Fairview are the best ever—and you may have as many as you want.

For amusement in summer, the guests have, in addition to the drives and picnics, croquet or bowls on the lawn. One of these days there will be a tennis court for the more actively disposed. There is a summer house, and hammocks

under the trees for those who like a quiet rest with a book for company. In winter there are the various sports—coasting on the hill behind the house, skating, and if you want to try your luck over the hard frozen crust there are several pairs of snowshoes to choose from. Those who like to tramp need never lack a companion for "Connie," the Chow, is always ready.

For a modest sum a steady old nag can be hired and, hitched to the one sleigh that has survived the coming of the automobiles, will cover the road at a good pace to the merry accompaniment of jingling bells.

Come indoors and enjoy the warmth of the old Franklin stove. There are not many of them seen nowadays, but Benjamin Franklin knew what he was about when he invented a "hot stove for sitting rooms." It is said that he refused a patent for it, on the ground

that he had profited so much by the discoveries of others, that he was only too glad of an opportunity to repay his debt, and to repay it in a shape so peculiarly acceptable to his country women.

When you have had enough of the fire, ask the hostess if you may make some candy. There is a recipe for Scotch Kisses at Fairview that will make your mouth water. She will take you to the "little kitchen" where all the special cooking is done, such as canning and preserving. Mrs. Fenno is constantly thinking of something that will add to the comfort and convenience of the House, and this is a recent addition. It has a set tub and an electric iron,—very convenient for a bit of light laundry work.

A FRIENDLY WELCOME

Fairview is open the year round. The rate per day is \$1.00 for student and \$1.50 for graduate nurses. If there is a vacancy, one may bring a friend, not a nurse, who will be expected to pay \$2.00 a day. A small charge is made for the use of the car, just enough to cover the cost of gasoline and wear and tear. The stay is limited to two weeks. Applications for rooms should be made to Miss Grace Cossey, 483 Beacon Street, Boston. The telephone number is Back Bay 8000. A twenty-four hour notice of arrival is requested. Guests are expected to care for their own rooms. The rooms are all single and as unlike the average lodging house as can be imagined. They are tastefully and comfortably furnished, and it is a privilege to care for them.

To supplement Mrs. Fenno's fund and the money that comes from the guests, the nurses of Boston and cities

and towns near by have held two very successful sales, in 1924 and 1925. Groups of nurses in hospitals, private duty and public health, made and solicited many beautiful and useful articles and the public responded and bought freely. On each occasion Mrs. Fenno opened her house for the sale and gave generous support to the undertaking. Almost \$6,000 was raised in this way. This is known as the "special fund," and may be drawn upon for extras, such as piazza furniture, hammocks, fruit trees, and so forth. Now that the special fund has such a comfortable balance, one hears rumors that "Ways and Means," which had had an honorable career before coming into our possession, is to be replaced by a newer model, one with removable seats, so that it can go marketing as well as picnicking. Last year some remarkably fine potatoes were grown, — more than enough for the family, and had there been any way of getting them to market, the profit from the surplus would have paid for the fertilizer for this year's crop.

Fairview is fortunate in having as hostess Miss Christena Wieck. She creates a friendly and homelike atmosphere and her interest and enthusiasm have been of the greatest value. She is a born gardener and if not endowed with chicken lore at birth, she has most surely acquired it since. She is an efficient and capable housekeeper and a first class cook when occasion demands.

Massachusetts nurses are very proud of their beautiful House, and they want the profession in other parts of the country to feel that they will be welcome. The latch string is out and the only limit to hospitality is capacity.

SOMETHING TO LIVE FOR¹

BY HON. HUGO HIRSH

NOT LONG ago I read an item in a newspaper stating that a trained nurse had committed suicide because she claimed she had nothing to live for.

Oh, if she had had but these words of Ella Arneal:

In sorrow bowed, the heart oft aches to breaking,

With crosses and with losses weighted down;
Thank God for this; both cross and loss are transient,

Still shines somewhere the everlasting crown.

Grief follows grief, and yet we live and labor,
Storm follows storm, still do we face the blast;

Divinity upholds and strengthens ever—
God's light breaks through the darkest shadow cast.

Nothing to live for!

And the world needing her help, her knowledge, her experience, her tact, her sympathy, her cheerfulness, her enthusiasm, her service.

Nothing to live for!

With thousands of sick people clamoring for nurses, with hospitals eager for their service, with plenty of work to be done, with experience of all kinds awaiting them, with lectures to be listened to and lessons to be learned, with knowledge to be acquired, with thousands and thousands of things to be seen, studied, enjoyed and laughed at, and with thousands and thousands of sick people to be cared for, nursed, consoled, amused and mothered.

Nothing to live for!

Why life and living are a part of God.

¹Address delivered to the nurses of the Brooklyn State Hospital, September, 1924.

Nothing to live for!

Why if there were nothing but service, that would be worth living for, and your profession is dedicated to service.

Nothing to live for!

And God's blue sky unfurled sweeps over us all, regardless of conditions, creeds or climes, and we have the benefit and the beauty and the blessedness of it all.

Nothing to live for!

And the grass is green and the flowers are beautiful and the birds chirp their gladness and the very air is full of the joy of living.

Nothing to live for!

Why, just see what your profession gives you. There are two qualities which it imposes upon you, which, of themselves, make nursing an ideal profession and make life worth living. These qualities are discipline and self control.

The former teaches you obedience to authority. The latter makes you throttle a quick temper and subdue an angry impulse. Both make for the sacrifice and subordination of self, and both bring to you a happiness which no money, honor nor position can purchase; they endow you with efficiency. The result is not only something to live for, but, if necessity or duty demands it, something to die for.

This is what is called the mechanical age. Almost everything is done or made by machinery. We sow, plant and harvest by machinery. We make tools by machinery and these tools, in turn, make machinery for other purposes. We make

shoes and clothes by machinery. We make underwear and ladies' wear by machinery. We make paper and print it by machinery and all the things that paper can be used for are made by machinery. We drive and hoist and travel on the earth, under the earth, and over the earth by machinery, and there are some inventors optimistic enough to say that in the near future man will harness the sun to do all his work for him and all that he will have to do will be to touch a button and the sun will do the rest—except to draw his pay.

But there is one thing that will never be done by machinery. There is one thing that no mechanism will ever perform, no matter how much of a marvel it may be or how ingenious its inventor may be, and that is nursing the sick and helping the helpless. And there is one individual who will never be replaced by a machine and that is the trained nurse, the tender-hearted, enthusiastic, cheerful, optimistic, loyal woman, who has entered the profession you have chosen and whose heart is in her profession and in nothing else. No, that is God's mechanism and no iron or steel or rubber, wood or paper can imitate God's work in that direction. We may imitate the bird and the fish; we may imitate flowers and leaves and fruits and vegetables; we may talk through the air to our friends thousands of miles away; by touching a button at our desk we may summon an army, but after all, our flowers and leaves are only paper or fabric; and our fruits and vegetables are only wax or composition; and flying in the air and speaking through space would be fruitless without God's mechanism; but a trained nurse with all her splendid attributes will never be imi-

tated by a man-made mechanism. And so I appeal to all who may read my words, that this spirit of love for the profession of the trained nurse be re-kindled in the young woman and that the possible greater money earnings in other trades or professions be discarded for this noblest of all professions.

Who of us can forget their heroic efforts during the World War? They placed their days, their nights, their health, their lives in the balance. Indeed, never did woman rise to greater heights of self-sacrifice or show a greater fidelity, even unto death. So, indeed, they proved what I have just said, that they had not only something to live for but something to die for.

I am sure of my words when I call it the noblest of all professions.

Then why have we not more applicants?² Why are the ranks of those who choose to enter so small? I am not so pessimistic as to believe that women have lost their ideal for this profession. I am not so inhuman as to imagine that woman, the queen of creation, that gentle, merciful, kind, tender, compassionate and charitable human being has become so imbued with the passion for money making that she has lost all those beautiful attributes which, in our generation and in all civilized countries, make her indeed a woman.

The goal of living is happiness. Selfishness never brings happiness. It may bring pleasure but never happiness. The love of money never brings happiness. No miser was ever happy. He may find pleasure in seeing his treasure accumulate; his eyes may brighten at the increasing gold in his coffer, but

²It is to be noted that this is written from the standpoint of the State Hospital.—Ed.

all this brings him no happiness. Happiness can only come through service, and the greatest happiness comes to those who help and serve those who cannot help themselves. Hence, the largest field for happiness is in the profession of the nurse.

So I bring this message to you, that while the labor of the day or the labor of the night may bring you weariness, while your patient's conduct may try your patience and your temper, and while your work generally may not have fulfilled your highest expectations, yet if you will but take stock of your many blessings of life, health, strength, work, friends and service, I am sure you will conclude that you have much, very much to live for.

Phillips Brooks in writing of "*The Way to Conquer*" said:

Life seems too much for you, too great a burden and too great a task; and yet if you are patient, brave and cheerful, by and by you will find that you have conquered life and are its lord. It seems to beat you down with

every blow; but at last there you stand, with your feet upon it, and you are victor over it and have gained out of it that which God gives to souls that do conquer life—character and strength and faith and love, and the wish to help and the power to help your brethren; to teach the souls that are being beaten and bruised and conquered by life, the way to conquer it and compel it to give them the tokens of liberty.

Some nurses will carry any burden to help another. Some will go any distance to render a service. Some will risk any danger to save another. Talk to such a one and say that there is nothing to live for and she will laugh at you. She will not speak of her cares, her troubles, her weariness, her sleeplessness. On the contrary, such a one will tell you that there is not a day in which she does not thank God not only for His many blessings, but because there is so much to live for.

I congratulate you upon your admission to the ranks of trained nurses and ask God to bless your lives, your efforts and your service.

TO REDUCE OR NOT TO REDUCE

BY MARTHA KOEHNE

(Continued from May Journal)

E. DIET AND EXERCISE. CORRECT METHOD

THE FOLLOWING advice should be given to an overweight person who wishes to reduce.

First of all, have a thorough medical examination, to see if there is any heart or kidney involvement.

Second, secure information on the kind of exercise to take. These exercises may be formal, or they may take the form of some sport or of walking. The point is, they should be suited to

the person and graduated. Consult a person specially trained along these lines, if possible. If such a person is not available, the Handbook of Positive Health published by the Women's Foundation for Health, 370 7th Ave., New York, gives some excellent suggestions. "Exercises for Health", one of the twenty little booklets which comprise the National Health Series, edited by the National Health Council, and published by Funk and Wagnals, is also devoted to this topic. At the same time,

the person should be taught the importance of massage, and proper methods of massage, in order that the face and neck may not get wrinkled and ugly.

Form the habit of drinking five to eight glasses of water daily.

Have a full realization that it is going to take a long time, and that it will require great strength of character and patience. Besides improving one's health, the moral training acquired adds greatly to one's poise and self-confidence.

WHAT SHOULD AN OVERWEIGHT PERSON REFUSE TO EAT?

Give up candy and sweets, rich sun-dae, French pastries and rich cakes. When pie is served, eat only the filling.

Stop eating white bread and similar milled cereal products, including rice and macaroni. They are almost pure starch, valuable for their energy content primarily, and that can be safely dispensed with.

Potatoes and sweet potatoes should be eaten in moderation.

Lard, vegetable oils, and butter substitutes should be omitted from the diet, and in their place an equivalent amount of the person's own body fat "consumed". According to Dr. Joslin, "A pound of you is worth 1500 Calories. You cannot lose a pound in weight without burning up a pound of you."

WHAT SHOULD AN OVERWEIGHT PERSON EAT?

Some fat must be included in the diet, because of its ability to help keep the intestinal tract in good condition, and for its satisfying effect on the appetite. The fats that should be used are butter, cream, or egg yolk, for they have a value in nutrition other than energy, because

of their content of Vitamin A. Boiled salad dressings should be used in place of rich mayonnaise, or a mock mayonnaise may be made from a good grade mineral oil, such as Nujol, using a recipe similar to the one used for making mayonnaise.

Root vegetables, other than potatoes, and all the green leafy vegetables should be eaten freely. The juicy types of fruit should be eaten regularly, but with no added sugar. If necessary, saccharin may be used as a sweetening agent. Such fruits as apples and bananas should be eaten rather sparingly. Although types of the fruits and vegetables listed in this paragraph contain some carbohydrate, they do not contain much. They do contain, however, so many other nutritive constituents which the body requires, such as bulk, vitamins, and minerals, that they should be eaten freely and regularly. At least one generous serving of one fresh raw fruit or vegetable should be used, besides those served cooked.

Tea and coffee may be used in moderation, not more than one cup of each. Once a day, only, an average helping of lean meat, fish, or poultry should be eaten. An egg may be used daily, and cottage cheese should be eaten frequently. At least one pint of milk must be used in some form or other each day. This may be whole milk, skim milk, or butter milk. It may all be taken as such, or some of it may be used in the food. It is necessary particularly for its lime content. Milk also furnishes good quality protein and is valuable for its vitamin content.

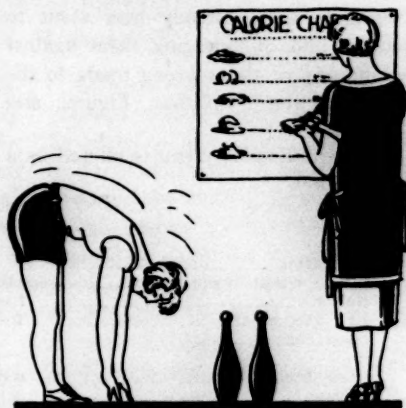
For dessert, the overly stout person may occasionally have some plain ice cream. Ices and sherberts may be used

somewhat more frequently. Plain cookies or plain sponge cake may be used once in a while. Fruits are always acceptable. Gelatin desserts may be used rather freely, as well as the lighter puddings. Be careful to avoid over-rich foods of all kinds.

GENERAL SUGGESTIONS

Overweight people should not eat between meals. They should eat three meals a day, preferably, but should leave the table while still a little bit hungry. As has been stated before, the loss in weight should be slow but steady.

The person concerned should familiarize himself with the Caloric value of the common ready-to-serve foods. Locke's Food Values, published by D. Appleton and Co., New York, contains extensive tables of composition of such foods. The Childs' Restaurants put out a most valuable pamphlet showing the composition and Caloric value of the foods served in their restaurants, in the size portion served. This booklet would be available to those living where these restaurants are found. Their menus carry the Caloric value of each item of food offered, also. Feeding the Family, —1924 edition preferably—, by Dr. Mary S. Rose, Columbia University, published by The Macmillan Company, contains much information along these lines. There are many other books giving data of this nature. People who are "reducing" should "Count their Calories" from time to time. Usually the diet should contain not less than 1200 Calories nor more than 2000, depending on how much overweight the person concerned is, and how active he is. The rate of loss is the best final guide for establishing the daily Caloric intake.



It is unwise to be weighed oftener than every two weeks. Do not get discouraged. Keep up the exercises and massage regularly. Those who do "stick it out" never regret the effort put forth. They are better looking than their fat friends, they have a much better chance to live a long, healthy and happy life, also. If, for any reason, one does not "every day, in every way, feel better and better", consult a skilled physician, and a trained dietitian or a nurse who has had special training in dietetics and nutrition. Do not accept advice from untrained friends and neighbors.

Nurses, in particular, should make every effort to avoid becoming overweight. If they are already over stout they should make every effort to reduce scientifically and successfully. They should do so for several reasons,—as an example to their patients, and for the sake of their personal and professional pride. Nurses have a wonderful opportunity to render invaluable assistance along the lines discussed, to their friends, patients, and the families of their patients, through educating them to the importance of prevention of obesity, en-

couraging those already over stout to reduce, and discouraging them against taking any of these wrong roads to the Land of the Sylph-like Figure, and directing them along the right road. They should always keep in mind that, as in most other things, precept as well as advice is necessary.

The following menu is offered as a suggestion, when as low as 1200 Calories is indicated:

Menu	Amount	Protein grams	Fat grams	Carbohydrate grams	Calories
Breakfast—					
Grapefruit	½	0.5	0.5	10.0	46.
Whole wheat bread.....	one thin slice	1.7	0.3	9.3	47.
Butter	1 tsp.	--	4.0	--	36.
Egg average size	1	6.5	5.5	--	75.
Clear coffee					
Lunch—					
Clear broth	6 oz.	3.0	2.0	--	30.
Saltines	3	1.5	1.5	10.5	60.
Butter	1 tsp.	--	4.0	--	36.
Combination Vegetable Salad—					
Lettuce	25 g.	0.25	--	0.8	5.
Raw carrot	50 g.	1.0	0.25	4.25	23.
Raw cabbage	25 g.	0.5	--	1.25	7.
Green pepper	25 g.	0.5	--	1.25	7.
Boiled dressing	2 tbs.	1.5	4.5	3.0	59.
Milk, whole	8 oz.	7.5	9.0	11.5	157.
Dinner—					
Roast veal	70 g.	20.0	7.0	--	143.
String beans, cooked	100 g.	2.0	--	5.0	28.
Butter	1 tsp.	--	4.0	--	36.
Pickled beets	100 g.	2.0	0.5	8.5	46.
Celery, raw	50 g.	0.5	--	1.8	10.
Whole wheat bread.....	one thin slice	1.7	0.3	9.3	47.
Butter	1 tsp.	--	4.0	--	36.
Fruit Gelatin—					
Orange and pineapple.....	50 g. each	0.5	0.5	10.0	46.
Gelatin—					
Whipped cream	1 oz.	0.5	11.5	1.0	110.
Milk, whole	8 oz.	7.5	9.0	11.5	157.
		59.0	68.0	99.0	1,247.

HEALTH QUESTIONS FOR YOUR TOWN

Have you in your city the following?

Five beds for general medical and surgical patients for each 1,000 of population.

One bed for each death from tuberculosis per annum.

Beds enough to give 25 per cent. of the births hospital care for three weeks.

Beds in convalescent hospitals for 10 per cent. of the patients admitted to general hospitals.

One bed for every 2,000 of population for the acute communicable diseases of childhood.

One visiting public health nurse for each 2,000 of population.

A medical social service worker for each 100 patients attending special heart clinics, to provide home instruction and guidance.

Sorting stations for the unusual, the problem, the ill-adjusted, the predelinquent child.

A prenatal service connected with every hospital that receives maternity patients—Haven Emerson, M.D., in "The Community's General Staff," *The Survey*, January 15, 1925.

TEACHING HYGIENE¹

BY HELEN F. HANSEN, R.N.

SINCE HYGIENE is one of the earliest subjects taught the preparatory student, it is very essential that the required information should be imparted in such a way that the student will see how the other subjects taught are correlated with this one, and also in such a way that habits acquired during this course may serve as a basis for making future studies more profitable.

This correlation with anatomy and physiology is especially valuable, even though the pupil has had very little of the subject at this time. I find it very advantageous to give some definite assignments with the hygiene lesson. For instance, studying the anatomy of the skin, and drawing a vertical section showing the sebaceous and sweat glands, makes the talk on the hygiene of the skin much more intelligible and, later on, serves as a review lesson in anatomy. The same is true of the study of the digestive, excretory, and circulatory systems, even though it cannot, of course, be very thorough at this time.

Too often, a course in Hygiene consists of a routine series of lectures, or assignments in a textbook. Instead, I think it is much better to use a method which will give the pupil some initiative, and accustom her to make the best use of reference books at hand. If this habit is developed during the preparatory period pupils, almost invariably, supplement the lectures and studies which come later in the course, with additional reading.

¹Read at the January meeting of the Southern Branch of the California State League of Nursing Education.

At each recitation, I give a mimeographed outline of the next lesson, followed by a bibliography of the books in our library pertaining to the subject. From ten to twelve pages must be read on this subject, and suitable notes taken. Instead of using the ordinary notebook for these reports, I find it a good idea to introduce the pupil to the value of a card catalogue. The name of the book, with the author, publishing company, and pages read, is placed on the top line. There follows, then, an outline of the subject. This must be printed small and neatly, and condensed in such a way that, ordinarily, the two sides of one card are sufficient for each report. These cards are then filed in alphabetical order so that they may be easily referred to at a later date. The student must hand these cards to the instructor once a week. For every failure to hand in the cards on time, the student must give an oral report on twenty extra pages, on a subject chosen by the instructor.

Besides this collateral reading, each one must read, once a week, a magazine article pertaining to hygiene. *Nation's Health*, *Hygeia*, public health magazines, *The Literary Digest*, and many other standard magazines furnish valuable articles. This not only encourages the student to keep up with the latest developments in an interesting subject, but also gives her experience in public speaking, as each pupil appears before the class, speaking from three to five minutes.

Taking the place of the ordinary notebook, I have each pupil keep an hygiene

portfolio. She collects as many clippings and pamphlets as she is able to find, and classifies them in an orderly manner. These are supplemented with pictures cut from magazines, pasted on sheets of paper. These pictures are then given headings and are placed with the article she wishes to illustrate. Quite a representative collection includes: Posture, Nutrition, Milk, Malaria, Oral Hygiene and Tuberculosis. It is surprising to see what a variety of material may be collected, and what clever headings may be given to the mounted pictures.

The value of posters and charts cannot be overestimated. The United States Public Health Service issues some very good ones on the House Fly, Influenza, and Malaria. Pupils with

artistic ability also contribute some valuable posters which serve as a means of instruction, as well as a means of beautifying the class room.

Especially valuable along this line, is a set of silhouette pictures, depicting posture. It always seems difficult to get the pupil to take this phase of Hygiene, along with the subject of the care of the feet, as seriously as it should be done. If a series of real photographs is shown, the importance of correcting whatever defects she may have becomes a vital problem to the pupil.

I have found that these methods have helped to make the subject of Hygiene assume one of real interest and importance to the students, and hope some of them may be of benefit to others also.

THE PREPARATION AND ADMINISTRATION OF GLUCOSE SOLUTIONS

By WM. J. DIECKMANN, B.S., M.D., AND JOSEPHINE KINSEY, R.N.

DURING THE last two years the use of intravenous glucose on the obstetrical service of Barnes Hospital has been constantly increasing. At present we are injecting amounts varying from 500 to 1,000 c.c. of 20 per cent., and from 500 to 2,500 c.c. of 5 per cent. or 10 per cent., over periods of one to three hours, and repeating two or more times daily, if necessary. The successful use of intravenous glucose without danger of reaction depends on the preparation and administration.

I

In the preparation there are three cardinal rules; violation of any one will invariably result in reactions. These

rules are: the glucose used must be chemically pure, the water must be freshly distilled, and the sterilization must be complete.

Any chemically pure glucose may be used. It need not be anhydrous, although if it is the solution will be clearer. At present we are using Merck's C.P. Dextrose. The bottles should be kept tightly corked and the contents should be kept clean. In making up the solution, one should know the water content of the glucose and make allowance for it. For example, Merck's C.P. Dextrose contains approximately 10 per cent. water, therefore 10 per cent. by weight of glucose is always added in excess. This will give

a concentration which will be within 1 to 2 per cent. of calculated strength.

The water is always distilled on the day of preparation. Our reason for insisting on freshly distilled water is to have a protein free solution, for many of the reactions are due to foreign protein. These reactions have been severe enough to cause a patient to become comatose. The water is heated slightly to hasten solution. After the glucose is all dissolved, it is filtered through three layers of filter paper, then through 8-10 thicknesses of gauze, and then placed in 500 c.c. flasks; preferably of a good grade of chemical glassware. All apparatus used is first thoroughly washed and rinsed in freshly distilled water, the flasks in particular being rinsed with boiling distilled water. Corks which have been treated similarly are inserted lightly, being kept in place with two layers of paper, which in turn are covered with two layers of gauze for reinforcement, and, finally, two layers of paper. The edges of the gauze and paper are trimmed and kept in place with rubber bands. After autoclaving, the corks are pressed firmly into place and the paper is kept in place with several turns of adhesive applied while the flask is hot.

The above procedure is advocated for solutions that are to be kept until used. Some of our solutions are six months old or more before being used. We never discard any solution on account of age. As to the question of deterioration from age, we have had no bad results from old solutions. The P_H does decrease slightly, but the actual titratable acidity is so low that it is negligible on introducing it into the perfectly buffered blood stream. We

see no need for buffering glucose solutions. The P_H in great part depends on the purity of the product used. The P_H of anhydrous glucose will remain higher than that of the usual C.P. product, and likewise with other inferior products. If the solutions are to be used within seventy-two to ninety-six hours, the mouth of the flask is covered with cotton, gauze and paper. These solutions should also be autoclaved.

The sterilization is preferably with the autoclave. With the corks loosely in place, the chamber is exhausted until a negative pressure exists and then the solutions are kept at 15 pounds for thirty minutes. At the end of this period the pressure is decreased slowly and when it is at zero, the flasks are removed. Care should be used in exhausting, for the solutions can be concentrated very easily. If the solutions are to be used within twenty-four hours, they can be sterilized either by boiling for five minutes, or heating for thirty minutes in a boiling water bath. As a result of the autoclaving, certain solutions will be yellow in color, due to caramelization. This is no contraindication to their use.

II

The administration is just as important as the preparation. Here, likewise, we have three cardinal rules, which are chemically clean infusion sets, maintenance of temperature, and regulation of speed of injection. Here again disregard of any one will result in a reaction, but more particularly violation of the first two.

The infusion sets consist of salvarsan tubes which are thoroughly cleaned and rinsed in distilled water. The rubber

tubing, approximately six feet in length, of 3-5 m.m. bore, is, if sulphur cured, before being used for the first time boiled for 30-45 minutes in a weak alkaline solution and then thoroughly rinsed. If the tubing is acid cured, only rinsing is required. The mouths of the salvarsan tubes are covered with two or three layers of gauze to remove particles of cork, gauze or paper which may have dropped into the solution. The sets are preferably dried and autoclaved. If boiled, it should be done in clean tap water if distilled water is not available, and not in the sterilizer where numerous other dirty instruments, basins, dressings, etc., have been boiled. Any protein, if in sufficient quantities, injected into the patient will result in a reaction.

The temperature of the solution at the needle should be between 37 degrees and 39 degrees Cent. This is obtained by immersing several coils of tubing in a bottle or pan of water at a temperature of 43 to 45 degrees and maintaining this temperature throughout the administration. There are several electrical heaters, but we do not think they are more efficient than the bottle of hot water. The stock solutions are kept at room temperature, consequently the temperature of the heater has to be watched closely. Injection of a cold solution will invariably result in a reaction which usually begins one hour after the injection.

A word as to the opening of the flasks. The adhesive is removed,—and then the cork, one half of which should project above the mouth of the flask, is grasped and, because of the reinforcing gauze, one is able to twist the stopper out and keep the mouth of the flask sterile. If

the solutions are cloudy they should not be used. Minute cracks in the flasks will permit entrance of spores and bacteria.

The rate of injection is most important. It is a well known fact that a normal person can tolerate a continuous intravenous injection of 0.85 grams per kilo per hour of glucose with a glycosuria. For intermittent injections this rate may be increased. For example, we usually inject 500 c.c. of 20 per cent. glucose in a period of approximately one hour, and the glycosuria, if it does develop, never exceeds 10-12 grams. For large amounts of glucose, the period of injection must be increased, and insulin may be used. The longest period we have kept a needle in place is three hours, but other clinics have kept a cannula in place for five and six days for continuous infusion.

As we have stated, reactions on our service are few in number. If one does occur, all points are investigated and usually the fault lies with the administration, the reason for this being that the internes administer the glucose and a certain amount of experience is necessary before it can be done properly.

To summarize briefly, we believe that the successful use of glucose solutions for intravenous injection is based on a number of factors which are:

1. A pure grade of glucose.
2. Freshly distilled water.
3. Proper sterilization and subsequent maintenance of sterility.
4. Chemically clean infusion apparatus.
5. Proper observance of temperature of solution during administration.
6. A calculated rate of injection.

Our conclusion is: If the above requisites are rigorously observed, glucose solutions can be injected with impunity.

A MARRIED NURSES' CLUB

BY CHRISTINE WILLIAMS PAUL, R.N.

IT WAS the ill wind of the "flu" epidemic of 1919 that blew the good of organization to the married nurses of Riverside. At that time, at the call of the Red Cross organization and the County Supervisors, under the efficient direction of Mrs. Charles Rouse, every married nurse in Riverside was drafted into service and it has been said, and truthfully I think, that it was due to their splendid response and their hard and faithful work that our death rate was kept to a minimum—67 being the total, while a neighboring city of about our size numbered 300 deaths during the epidemic. That was the beginning, for some of us were discovered then who prior to that time had been unknown to others.

Then came the call from the Community Settlement Association for some of the married nurses to help organize and maintain a maternity cottage in connection with their work. At this time Mrs. John Knight and Mrs. Charles Rouse, both married nurses, simultaneously evolved the idea that the married nurses of the community might band together into an organization. This we did in the fall of 1921, naming our club "The Married Nurses' Club", electing Mrs. Samuel Kellar, wife of one of our leading doctors as our president. Since then have followed busy, happy years for us.

In 1923 we changed our name to "The Nightingale Club". We are one of the service clubs of the city. The Club is represented on the County Clinic Board and the Kiddie Kamp Committee.

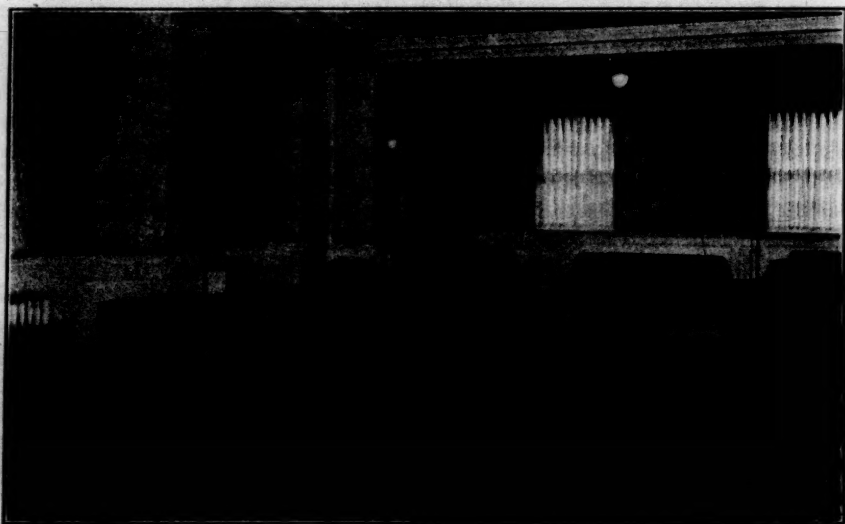
Membership is limited to twenty-five, all graduate nurses of standardized hospitals. We are particularly fortunate in having many well married nurses in Riverside, almost all being wives of doctors, attorneys, business or professional men. In addition to the regular members we have several honorary members as follows: the Superintendent of the Community Hospital, the President of the County Clinic Board and the two clinic nurses.

Some of the things the Club has done are as follows: It has sponsored the Well Babies' Conference at the Fair each year. These babies between the ages of six months and six years are examined by the leading physicians, assisted by members of the Club. Many defects are discovered and recommended for correction. These children are followed during the year by the Clinic Nurse to be sure that the defects are corrected and much good is accomplished from an educational standpoint for, mind you, each child that is brought to the Well Babies' Conference is supposed by its fond mother to be a candidate for the first prize as a perfect child. For two years the Club has sponsored the Christmas Seal sale to help support the tuberculosis work of the city and county. Members have assisted at the Kiddie Kamp each year; this year the Committee sent eighty-three below-par children to the mountains for three weeks. Each year the Club entertains the nurses in training of the local Community Hospital. It endeavors in every way to raise the standards of our

profession. Members assisted at the luncheon to the service clubs, at a reception to the public, and in sewing for and moving into the new hospital recently. Many of the members are members of the Child Welfare Department of the Riverside Women's Club. Members have been instrumental in effecting an affiliation with the local Junior College for the nurses in training at the Community Hospital, where-

by a student may take a thirty-six months' course and graduate in nursing, obtaining at the same time two years of college work.

We have quite as much fun as work, meeting once each month at the homes of the various members for social times. At present we are planning a bridge party which will be a benefit to help furnish the reception room of the new quarters of the Riverside County Clinic.



ALUMNAE ROOM, ST. LUKE'S HOSPITAL, ST. LOUIS, MO.

ST. LUKE'S (ST. LOUIS) ALUMNAE ROOM

BY LUELLA PURCELL, R.N.

OUR SCHOOL is an old one and for many years it has had a well organized, but very inactive alumnae. Only in the last few years have we accomplished anything worth while. We are now proud, justly, we believe, of what we have done, for we have recently completed a \$10,000 endowment fund for the benefit of our sick members, and

have made a promise of \$5,000 to The Bishop Tuttle Memorial, \$3,000 of which has already been paid. We have also spent \$600 in the furnishing of a rest and club room.

About two years ago, the superintendent of the hospital set aside a beautiful room in the student home for the exclusive use of the alumnae. This room is

large, bright and well shaped, with a fully equipped kitchen adjoining. We have not only made it cosy and comfortable, but also attractive. We chose the brown fibre furniture, upholstered in soft-toned tapestry which, with the old blue rugs and lamps, and the English curtains of heavy silk in light tan make a satisfying whole. Couches and a chaise lounge give ample places for tired nurses to stretch out and relax when they have a few moments for rest and the three writing desks are often in use.

The nurses on duty in the hospital have great pleasure in the use of the room, as it is just across the hall from

the main dining-room, and they are often able to snatch a few moments at the meal hour for a friendly chat or to write a note, in addition to the use made of it in off-duty time.

There we have our monthly meetings, our teas and receptions, and each member of the Association has the privilege of using the room for parties or dinners. A goodly number are glad to take advantage of this privilege as many are rooming in homes where they are able to do very little entertaining.

Not satisfied with these achievements, our next effort will be to create a scholarship fund in order that St. Luke's nurses may further extend their usefulness.

SUMMER COURSES

Florida: The University of Florida offers this year a special summer course in Nursing Education from July 10 to August 7.

This course is designed primarily for administrators and teachers in schools of nursing, but it is open to any graduate nurse interested in the general problem of nursing education and its administration.

For further information write to the University of Florida, Gainesville, Florida.

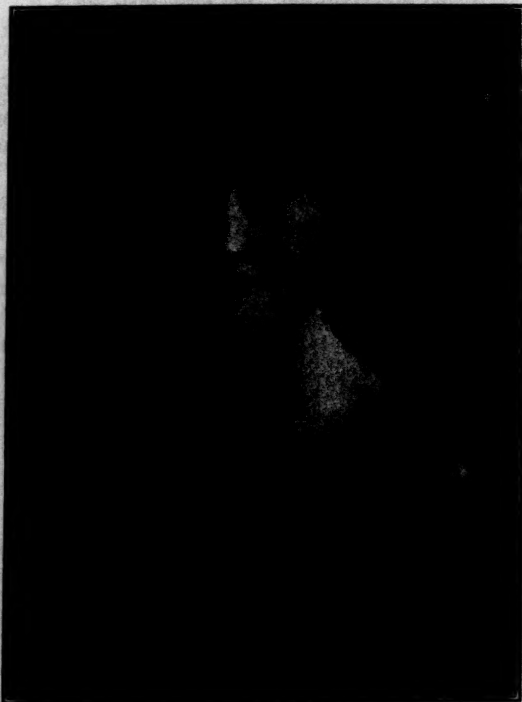
Blanche Pfefferkorn, executive secretary of The National League of Nursing Education, will direct the course.

New York: Summer Courses in nursing have been given at Teachers College, New York City, since 1911, and the enrollment has increased from the original two students to an average of between 250 and 300 each summer.

The term this year is from July 6 to August 14 and applications should be made well in advance to the Department of Nursing Education. Some twelve courses are available in teaching, supervision, and administration in schools of nursing and in public health nursing, in addition to courses of correlated interest such as Mental Hygiene and Preventable Diseases. Courses are also available in Teaching of Home Nursing and Child Care; Home Nursing, and Health Care of Pre-adolescent Children.

Pennsylvania: Philadelphia.—A course in Hospital and Institutional Management will be given this summer at Temple University. Doctor Coombs and Charles S. Pitcher, Superintendent of the Presbyterian Hospital, will conduct the course, assisted by other lecturers.

WHO'S WHO IN THE NURSING WORLD



XLVII. MARGARET K. STACK

BIRTHPLACE: Wyalusing, Pennsylvania. **PARENTAGE:** Irish. **PRELIMINARY EDUCATION:** High School graduate. **PROFESSIONAL EDUCATION:** Graduate of Connecticut Training School for Nurses, New Haven, Conn. **POST-GRADUATE WORK:** Lecture courses in public health and allied subjects. **POSITIONS HELD:** Private nursing, five years; with the New Haven Visiting Nurse Association eight years, during which time she had charge of various departments and was assistant superintendent when she left. Field Director for Child Welfare, Connecticut State Council of Defense. Direc-

tor of Child Hygiene and Division of Public Health Nursing, Connecticut State Department of Health, three years. **OFFICES HELD:** Director of the Graduate Nurses' Association of Connecticut, Director of the Connecticut Organization for Public Health Nursing, Health Chairman of the Connecticut Federation of Women's Clubs, a Director of the American Child Health Association; Fellow of the American Public Health Association, and member of Governing Council. **PRESENT POSITION:** Director, Bureau of Public Health Nursing, Connecticut State Department of Health.

EDITORIALS

WANTED—A STEREOTYPE *Stereotype of the R.N.*

EIGHT OR more of the state associations have been actively concerned with legislation on nursing during the past winter. One State Board, that of New Jersey, has lost a case brought against it by a young woman desirous of registration, but who is not a graduate of a school accredited by the Board. Final reports on legislation are not yet available at National Headquarters but it is quite clear that the amount of whole hearted, strenuous, self-sacrificing effort expended by nurses in protecting existing standards or in attempts to advance standards is out of all proportion to the results accomplished. Any effort that tends to crystallize thought in our nursing groups on the subject of decent educational standards for nurses is not wholly wasted and this is always a by-product of legislative campaigns, but such a method is too wasteful to be deliberately chosen. What is needed is a stereotype of the worthy registered nurse—a woman with the personal attributes that are too oft enumerated to require comment here and with a sound basic education in nursing that will make her a safe worker wherever she may practise her profession. With such a stereotype established, successive groups of legislators will not need to be "educated" on the difference between training and education.

The nursing profession itself is sadly in need of such a stereotype. This, to be useful, must include the reasonable aspirations of the profession and be understandable to the lay mind. Some

persons believe the registered nurse to be a professional snob, unduly self satisfied and pleased with herself and her status, and desirous of keeping others out of her select circle. Others believe her to be a trades unionist concerned solely with hours and prices, a "clock watcher" if not a "whistle listener." Yet others believe her to be an intellectual and cold blooded "high-brow." Amazingly few seem to believe her to be sincerely concerned with the quality of her work, although the bulk of the profession fall in this group. Undoubtedly this is due to the fact that the good nurse, in the actual practice of her profession, finds little need of letters or titles. Her work is her real insignia and she has failed to teach the public to look for any other.

Stereotypes are not easily changed. The ones cited are based on evidence, we grant, but it is slight in comparison with the total number of nurses. The profession naturally produces some deviations from the normal but the deviations cited exist in small numbers. The satisfactory nurse, whatever her position, seems rarely to be thought of as a registered nurse, but many such nurses are well prepared *because* the schools from which they came have really striven to maintain state or even better requirements and educational standards. If satisfactory nurses did not far outnumber the other type, the profession would be dying out instead of progressing by leaps and bounds. This stereotype of the satisfactory nurse as a registered nurse is the one we would put into the minds of physicians, legislators, jurists and the great body of the

nurse employing public. Opposition to nursing standards seems always to be based on deviation from the normal in nursing rather than on the average or better. It therefore behooves the profession, especially the thousands of good private duty nurses and others who are giving bedside care to patients and who are teaching health in a satisfactory fashion, to make known the fact that *they* are registered nurses. Only by concerted action can we build up confidence in the worth of registration as a means of assuring the safety of the patients who are put in the care of nurses and as a means of insuring a continuous supply of equally worthy nursing.

The burden of legislative programs would not invariably fall on the shoulders of the crusading few if the many were alert to their opportunities for and the importance of establishing in the minds of patients, friends and acquaintances an honest stereotype of the registered nurse as one who is working faithfully, intelligently, and quietly at her appointed task, whatever it may be.

Hand in hand with the stereotype of the desirable type of registered nurse must go one of an accredited school and one of a state board of nurse examiners as an agency of helpfulness and not of autocratic authority. We venture to say that thousands of nurses limit their knowledge on these subjects to the fact that their own schools are or are not accredited. Such thinking is too narrow to be worthy of professional workers. It is time we woke up to the importance and to the dangers of stereotypes. That of the registered nurse should be a very beautiful thing, glow-

ing with spirit and the glory of service. Private duty nurses! Here is an opportunity for a great service to your profession. Set about establishing in the mind of the world a concept—a stereotype, if you will, of a registered nurse as one who has won state recognition because she has prepared to practise intelligently the art of nursing, an art which rests on a sound basis of scientific knowledge and is animated by a real love of humanity.

THE SOUL OF THE NURSE

[This editorial was written for *The Modern Hospital* by Dr. W. C. Rucker of U. S. Marine Hospital No. 14 and is reprinted by permission. We do not agree that student nurses "are not given an analysis of those traits of character which may be their protection or their undoing," for we believe most schools make a sincere effort to give this instruction. The subject is of such importance, however, that we have pleasure in presenting Doctor Rucker's original analysis and generous conclusion.—Ed.]

EVERY ADMINISTRATOR of experience has learned that, granted skilled craftsmanship, the most important qualities which his subordinates must have are those of the soul, qualities which enter into the formation of the ingrained personality, qualities which determine the success or the failure of the individual and the organization to a greater extent than any other factor which is a part of collective effort.

The word soul is not used in a religious sense, but rather connotes those attributes which are the essence of character and hence the guiding force in the affairs of life. They are not peculiar to any profession or occupation but they are particularly essential to the nurse who, in her contact with the mentally and physically ill, is called upon to exhibit the highest quality of character.

Unfortunately, nurses in their training

(and this applies equally to most of the professions) are not given an analysis of those traits of character which may be their protection or undoing in their life's work and when they are brought face to face with them realize but dimly their importance. Like many other qualifications, they are partially innate; always they are capable of cultivation, with care they may be developed and rounded out until that noblest of women is produced—the Ideal Nurse. Crystallized, these essentials reduce themselves to three, with several subdivisions. They are common sense, earnestness and honor.

Common sense includes those good, sound, ordinary intuitions which are supposedly common to all mankind. It is the congener of judgment, that operation of the mind involving comparison and discrimination and by which knowledge of values and relations is formulated. Common sense and judgment have as their background knowledge and always the common-sense thing to do is the right thing to do. All common sense is based on charity and justice, kindly, tactful charity and justice administered with that keenness of perception, discernment, deduction and discrimination known as acumen.

Allied to it is simplicity, the antithesis of affectation. Simplicity connotes a sense of humor, that rare virtue which is the antidote for dry egotism and which permits a dissociated view of self absurdities. The great forces and the great people of this world are simple. It is only the weak, the inefficient and the lazy who are obliged to resort to the protective mimicry of conceit and artificiality.

Part and parcel with simplicity is

self-control, the secret force which controls others. Power of will and power of self-restraint require strength of feelings and strength of self-command; they are the corner stones of strong character. An ungovernable temper is the symptom of defective mental poise, an impotence of coördinated effort. Those who shout, nag, taunt or are vindictive cannot inspire confidence in their associates. The higher the vocal note, the lower is the effect produced. Sarcasm indicates inadequacy of self-control and is a weapon which wounds those who use it. Tact, the oil which lubricates the bearings of human intercourse, is, on the contrary, an efficient instrumentality in accomplishment.

Earnestness is sincerity of effort. Without it there can be no real success. Energy, enthusiasm and perseverance are its handmaidens and assiduity, the ability for hard work, application and diligence, its result. Possession of these qualities forefends against defeat. They are qualities which have won the day at many a bedside. Inspired by faith, —faith in the cause, in oneself, in mankind, and in a divine Providence—they move mountains. True faith breeds true optimism, the quality of seeing only the best in men and situations, a heartener when reverses come; a shining beacon marking the course to achievement. Faith, though, cannot stand alone; it must be supported by courage. But courage as a quality must be continuous. It does not imply fearlessness; on the contrary it knows fear and conquers it and when this virtue is strong in withstanding adversity, it becomes fortitude, an ability to labor on against threatening defeat and to overcome the forces of disease and death.

Earnestness is the parent of steadfastness and poise and from these comes dignity, that virtue of calmness and equanimity of mind and action which is an inspiration to the sick.

Essential as is common sense and absolutely necessary as is earnestness, they are valueless without honor, the inherent virtue of every normal, unvitiated mind. Its corner stone is truthfulness. In the nurse's more than in any other profession, accuracy of mind and tongue is a vital necessity, because on it may depend human lives and happiness. Courage enters into its formula because of the readiness with which moral cowardice prompts deviation from the line of exact truth. Honor is an unselfish virtue; it places the task ahead of the worker and when necessary sacrifices the latter to the former. It is a sheet anchor in temptation, a guide in conduct, and an inspiration to the highest and best. It shines brightly in defeat and is modest in success.

These are the blocks which fitted together make the mosaic of the nurse's soul. It is no wonder then, that the nursing profession is honored of all men, that they who coax the tired spirit back into the weary body are the emblem of all that is noblest, most selfless and sublime.

"GO-GETTERS"

THE PUBLICITY Committee of the California State Association has had a bright idea. Bright ideas are by no means rare in the West, but this is a particularly good one and so we pass it on. The Committee is compiling an informative folder on the National Nursing Organizations for general distribution, but especially for senior

nurses. The organizations will be shown graphically. Descriptive matter will be concise. In order that the advantages of membership may be clearly stated, the Committee has launched a contest, the prize to be awarded for the best set of five reasons for joining the national organizations. The winning set will be incorporated in the folder.

Any California nurse, or group of nurses, or senior student may compete. If a graduate wins, her association dues will be paid for one year. If a student wins, she will receive a year's subscription to *The American Journal of Nursing*. We think that he who runs may read more than one merit in such a plan!

FOR THE GOOD OF ALL

The Government has asked all newspapers and magazines to call the attention of their readers to the waste involved in sending carelessly addressed mail matter.

A letter that is worth sending at all, is worth sending well, we might say. Every address should be legible, accurate and complete. Every letter or package should carry the name and address of the sender.

The Government spends annually \$1,740,000 in looking up addresses that are inaccurate or incomplete.

We are glad to add our own plea to that of the Post Office authorities, for often we are unable to answer an important question or to comply with a request because we have not the address of the inquirer.

All persons who send in subscriptions for others are urged to make sure that they have the names and addresses as they should appear on the magazine.

DEPARTMENT OF NURSING EDUCATION

LAURA R. LOGAN, R.N., Department Editor

PSYCHOLOGY IN ITS APPLICATION TO THE DAY'S WORK¹

BY MARION JULIA FABER, R.N.

TWO VIEWPOINTS will be considered, that of the teacher and that of the student. But only one reaction is of any special interest to us as teachers, the reaction of the student or the behavior of the student in response to various stimuli.

In terms of psychology, behavior is all the responses that an organism makes to any given stimuli. Psychology is no longer the cold, theoretical science of the mind. Psychology is the science which aids us in the prediction and control of the behavior of human beings. Behavior has also been defined as habit formation together with those factors responsible for habit formation. We have found that responses, reactions, or behavior whichever term you choose, are as varied as are the stimuli. In this particular reaction the teacher and her subject matter represent the stimulus, the student is the organism receiving the stimulus, and the behavior of the student is the reaction to this stimulus.

Thorndike says we do not educate people unless we change them and nursing education is no different from any other in this respect. What these changes should be and how to bring them about is the problem of nursing education and psychology combined. We do know that in every form of education we must utilize inborn tendencies; we must know how to form habits which will be a help, not a hindrance in our day's work; we must be able to

develop an interest which will be an incentive to the formation of the highest ideals in whatever work we are doing.

We should be able to teach a psychology which will make the students wish each other well, which will increase the sum of human energy and happiness and decrease the sum of human misery.

Any psychology should aid us in preserving and increasing desirable qualities of body, intellect and character, as well as aid us in eliminating the undesirable traits. To control human nature, we must know human nature; to know human nature, we must know the science which gives the laws governing the changes which will strengthen good traits and eradicate useless or detrimental traits. This science is psychology.

We will consider some of the specific stimuli and the responses made to these stimuli. A teacher's words, gestures, facial expressions and posture act very definitely as a stimulus toward either a desirable or an undesirable reaction. Of course, lighting and heating must not be forgotten in considering the stimulating or depressing effect of environment. A warm room will affect the interest of even a very alert group disastrously. If we, as teachers, fail to arouse any mental zest in a class, or if we fail to lift a class out of an apathetic, dull, good behavior, then we feel that the teacher as a stimulus is not a success. An even more important criterion of successful stimulation on the part of a teacher (and this seems especially vital to me in nursing education

¹Given at the annual meeting of the Ohio State Association of Graduate Nurses, Columbus, Ohio, April 17, 1924.

where the issues at stake are so closely related to the universal health of our country) is the failure to arouse an interest which will be enduring and creative for the future and not just for the short period of time in which the subject is being taught. If psychology were a perfected science, then any teacher could tell the effect of any stimulus and the course of every possible response. But since this is not the case, all the instincts which have been proved effective for good, should be utilized. Curiosity, emulation, kindness, sociability and independence are a few of the instincts which can be used as stimuli to desirable habits and reactions in any system of education. Education should act both as an excitant and restraint, as learning becomes a bugbear when it involves only restraint and monotony.

Expression as well as impression should be considered. Not only what we think we give the student, but what she takes from us is even more important. What we "get across" to her is the evidence for or against us as real teachers. That is her expression of the impression made upon her by our teaching. Expression on her part is necessary to prove that we "got it over" to her. We must be sure that there is in the student's mind a link which connects what she has got theoretically with what she is most vitally concerned—her work.

Still another very important step beyond the process of connecting the theory and practice is the power of selection which is a most vital part of this expression. The student must be able to exercise judgment in linking what you gave her with what she is doing, using only that which is fundamental. She must see not only the individual trees

in the forest, but the forest as a whole or else she will be completely bewildered.

Reactions will be our next consideration. A practical psychology strives to influence behavior so that only desirable reactions result. Every reaction must take the form of a specialized capacity to be of practical value for better living. Honesty may be one manifestation, executive ability another and self-restraint may be still another. The student's psychology to be of any real value must not only give her an insight into the management of such things as the daily routine of bed making, baths and dusting, but she must somehow gain a similar insight as to her conduct toward staff doctors, internes, other students, patients, floor maids and orderlies. Self restraint, energy, precision, originality, coöperation, self denial, self reliance and sympathy are only a few of these very desirable specialized capacities which will be of value to the student in their practical application to her work as a nurse.

If every teacher realized that it is her special duty to teach two great lessons, the task of the control of behavior might be a little less difficult. These two lessons are: first, to teach the nurse to judge only by facts, not by feelings, and second, to utilize every noble sentiment by making it an incentive to the formation of good habits. This problem of behavior would become more definite, too, in the mind of a teacher if she realized that before any moral character can come to its full maturity, good habits, rooted in a strong instinct, must be firmly established. Also there must be a coördination of these habits which will fit the student to meet unexpected problems in her work. The

teacher must develop in the student a sound judgment which will enable her to stand firm in any decisions which she may be called upon to make.

Differences in personality also constitute a problem of psychology, as variety of personality complicates the responses to stimuli. We find many types of personality with which we as teachers must deal. Here again psychology can aid both us and the student. There are the naturally buoyant and depressed, the self confident and timid types, the explosive and hesitating, the impetuous and calculating, the docile and refractory. We might also divide all types of personality into two classes, the hopeful and suspicious. One type of person has an imperturbable satisfaction with herself and everything she does. At the opposite extreme is the type of person which always feels "put upon." This type is sure that the world is a hard place; she is either always apologizing, sulking or complaining. We might say that the first group verge toward delusions of grandeur such as we find among certain types of the mentally unbalanced. The second group verge toward delusions of persecution.

Psychology can be applied both in the form of suggestion and auto-suggestion to these two groups. The first group must be made to see that their work must measure up, first of all to the high standard set by those in charge of the nursing school, as well as to their own somewhat superficial and inexperienced standards. The second group must be made to realize that good judgment rather than feelings should be followed and that their world will be just what they make it, a good or a hard place in which to live.

The realization that we create much of our own suffering should be brought home to our students. We are all prone to blame our environment or our ill luck for our unhappiness, everything but our undisciplined selves. The art of showing outward control of nerves is very valuable, but our work is only half done if we allow worrying thoughts to reduce us to a state of bodily and mental ill health. Too common is the tendency to regard character as something quite beyond our control, something with which we are born and which we must carry to our graves. All of us sometimes say, "I am sensitive, I can't help it," or "I have a quick temper and I can't help that." This is a refusal to accept any responsibility for the consequences of these defects. Self education alone can help such a one. We must bring to each student the idea that happiness can only be found in the steep path of self education. Often the student feels that in other surroundings and with other work she could be happier. She forgets that we largely create our own environment and carry it with us wherever we go, thus insuring for ourselves either a great measure of happiness or a great measure of misery.

In addition, the psychology of the day's work should bring to each student the realization that life is not lived alone but in company with other human beings, and we are responsible not only for our own happiness but in a measure for that of those with whom we are associated. Control of our conduct is the measure which will help to make our associations with our comrades what it should be. Control of behavior is the foremost aim of any applied psychology, and we know that the keynote of all

healthy and happy life is control in every direction, control of body, thoughts, emotions and acts.

White in his book on Mental Hygiene says that our thoughts can actually cause disease if not properly directed. Such apparently physical disorders as stammering, headaches, constipation, diarrhea, gastric ulcer, ptosis of the kidney and menstrual disorders have been proven to be of a purely psychic origin. All diseases of such origin can only be cured by removing the cause of the character defect, which produced the disease.

This brings us to the subject of health and its relation to psychology. Our standard of health is far too low. Our standard has been only that degree of health which enables us to do our work, but not necessarily to enjoy doing it. We accept freedom from disease as our standard. Health should be positive, not negative. We should feel the joy of living. We must bring to those whom we are teaching, the thought that it is not our "nerves" which are at fault but our inability to control our nerves. Nervous, should mean full of nervous force, just as muscular means full of muscular strength. Usually when we speak of "nervousness," we advertise lack of self control. If our students thoroughly understood that hysteria and feigning illness are a moral as well as mental weakness, a more common sense attitude toward illness would result.

A word should be said concerning the girl of whom we speak as a "day dreamer." We do not as a rule consider this a grave fault. Our attitude is usually rather quizzical, amused or tolerant, according to our individual dispositions. These girls are called impractical or "good" only in theory. If this type of

student is to become successful in nursing or in any other walk in life, we should give her some help. Day dreams can be made a good influence, when properly directed. We know that the poet, orator or any other man of genius probably created his greatest work through the inspiration and stimulus of a day dream, but he combined with this day dream some directive thinking.

The day dreamer who lets his day dream master him, rarely accomplishes any real work. The dream must be accompanied or rather followed by the purposeful carrying out of the ideas suggested by it, else it will prove to be a great hindrance to any real progress. We know that a suggestion can be carried to the brain where it becomes an idea and the idea is then transferred into an act.

When the realization is brought to each student that self control is the aim and purpose of all education and the only method of gaining this self control is by practicing self control today, tomorrow, and every day, just as general accuracy and thoroughness can only be gained by seeking accuracy in every situation, then psychology will be a truly applied science. If our students can be made to feel that no one becomes honest except by telling the truth, or trustworthy except by fulfilling each obligation she accepts, that no one can win the spirit of love and service who does not day by day and hour by hour do each act of kindness which chance brings to her, that the mind never gives something for nothing, that habit may rule us, but it never fails us in our time of direct need, psychology will then begin to be a real and present help in our day's work.

REVISION OF THE STANDARD CURRICULUM

(Continued)

ELEMENTS OF PATHOLOGY¹

Time: 15 hours. Lecture, demonstration and laboratory work. Pathology should be given as soon as possible after the first term and should serve as a foundation for courses in medical nursing, surgical nursing, etc.

Teacher: The course is conducted by a pathologist with the assistance of a nurse instructor, if necessary.

Objects: This course is intended to help the student understand the more generally accepted causes of disease, the nature of some of the more common disease processes, and the meaning of terms used in describing pathological conditions. It should give practical help in understanding treatments which are prescribed for patients, the reasons for the various specimens required, and the need of special care in securing and preserving them.

OUTLINE OF LECTURE, DEMONSTRATION AND LABORATORY WORK

I. Introduction to Pathology.

(Lecture) Importance of knowledge of pathology to the nurse. Relation to anatomy and physiology, bacteriology and chemistry. Classified causes of disease. Growth of tissue, progressive and regressive changes. Progressive changes: (1) hypertrophy, normal, physiological, compensatory, disease; (2) hyperplasia; (3) regeneration. Regressive changes: (1) atrophy, normal, senile, disuse, physiological, pressure; (2) degeneration, cloudy swelling, fatty infiltration, pigmentation, calcification; (3) necrosis, mechanical, chemical, changes in blood supply, bacterial.

II-III. Inflammation and Repair.

(Lecture and Demonstration) Inflammation defined. Etiology. Elements of inflammatory reaction: serum, fibrin, red blood cells, leukocytes. Symptoms of inflammation. Types of reaction: serous, fibrinous, purulent, hemorrhagic. Clinical types: local and diffuse. Process of repair. Sinus formation.

¹This outline was prepared by a sub-committee composed of the following members: Mary Marvin, Chairman, Margaret Carrington, Anna Gibson, Leila Given, Susie Watson, Dr. Margaret Warwick.

Adhesions. Fistula. Scar formation and results. Demonstration of plates showing inflammatory process. Bedside clinic, if possible.

IV. Special Inflammation, Tuberculosis.

(Lecture and Demonstration) Review etiology and portal of entrance to body. Sites of infection: lungs, pleura, glands, intestines, meninges, peritoneum, bones, kidneys, Fallopian tubes. Types of lung infection, pulmonary, pneumonic, miliary. Laboratory tests: purpose and significance.

V. Special Inflammation (Continued), Syphilis.

(Lecture and Demonstration) Review etiology and methods of infection. Stages. Lesions: respiratory tract, alimentary tract, circulatory system, bones, reproductive system, congenital, late hereditary, nervous system. Laboratory tests: Wasserman, blood or spinal fluid; colloidal gold, spinal fluid; Treponema pallida, tissue or smear.

VI. Tumors, Benign.

(Lecture and Demonstration) Definition of tumor: general characteristics of tumors; classes of tumors, benign and malignant. General characteristics of benign tumors. Types: (1) epithelial tumors (from ectoderm), wart, papilloma, adenoma, cystadenoma, pigmented moles; (2) connective tissue tumors, fibroma, lipoma, chondroma, osteoma, myoma, hemangioma, ganglion; (3) congenital tumors, teratoma, dermoid cysts. Demonstration of plates, pathological specimens. Bedside clinic.

VII. Tumors (Continued), Malignant.

(Lecture and Demonstration) Definition: etiology unknown; general characteristics, especially metastasis. Types: (1) carcinoma, tissues involved, sites, prevalence; (2) sarcoma, tissues involved, sites, types,—(a) glioma, (b) dura endothelioma, (c) melanoma, (d) hypernephroma. Social aspect and importance of early recognition of symptoms. Pictures, specimens, bedside clinic.

VIII. Necroscopy.

(Demonstration).

IX-X. Examination of Blood.

(Lecture and Demonstration) Hemoglobin estimation, Tallquist and Sahli methods. Calculation by students of their own hemoglobin by former method. Color index, red and white blood cell count. Demonstration by technician but students might make some estimates. Differential counting. Examination of stained specimens to show abnormal blood cells. Demonstration of coagulation time and hemolysis tests for transfusion. Examination and discussion of blood sheets showing normal and abnormal laboratory findings in relation to respective cases. Brief related discussion of anemia, pernicious and secondary: leukemia, myelogenous and lymphatic.

XI. Sputum. Spinal Fluid.

(Lecture and Demonstration) Source of sputum. Inspection of specimens: amount; consistency and appearance, frothy, mucoid, purulent, bloody; odor; color; casts of bronchi; living tissue; Dittrich's plugs. Precautions, methods and time for collecting sputum. Examination and discussion of laboratory findings on charts in relation to diseases of patients.

Spinal fluid tests. Normal pressure, appearance and amounts. Chemical tests for globulin and significance. Inspection of prepared slides: cell count; smear; characteristics of fluid in different diseases such as meningitis, poliomyelitis, tabes dorsalis, and cerebrospinal syphilis.

XII. Gastric Contents and Feces.

(Lecture and Demonstration) Fasting contents: gross examination to show normal amount, consistency, color, odor, and presence of food residue. Specimen for demonstration. Microscopic examination to determine presence of blood, pus, epithelial cells, tumor cells, and organisms. Chemical examination to determine amount of free hydrochloric acid and blood. Explanation of a test meal and comparative examination of gastric contents after this procedure. Findings in carcinoma and gastric ulcer.

Feces: abnormal colors, consistency, form. Inspection of specimens to show food residue, mucus, blood, pus, shreds of mucous membrane, gall stones and the more common in-

testinal parasites. Chemical examination to indicate the presence of bile or blood. (This does not include the study of infants' stools.) Examination and discussion of various laboratory reports of gastric contents, and feces, in relation to respective disease conditions.

XIII-XIV. Urine.

(Lecture, Demonstration and Laboratory) Analysis of urine. Characteristics of normal urine reviewed. Variations from the normal and the more common conditions in which they are found. Demonstration and explanation of the renal function test. Individual laboratory work on characteristics of urine, normal and abnormal. Explanation, demonstration and practice in testing for albumen, acetone, and diacetic acid. Demonstration and explanation of pus and casts. Characteristics of urine in diabetes and nephritis.

XV. Examination.**METHODS OF TEACHING**

1. It is suggested that this outline be used as a guide in the choice of material, rather than as a course in its entirety.
2. Laboratory work on the part of the student should be encouraged when possible and practicable such as in the study of blood and urine.
3. Demonstrations by the teacher should take the place of laboratory work when experiments require either skilled technic or much time.
4. Normal and abnormal specimens should be shown together for comparative purposes whenever possible.
5. The necroscopy is justified because it, and it only, shows the human organs in their relationships, makes the discussion of pathological conditions more interesting and real, and stimulates nurses to appreciate more keenly the symptoms produced by the condition of their patients.

EQUIPMENT AND ILLUSTRATIVE MATERIAL

Normal and pathological specimens, patients' charts showing laboratory findings in various diseases, X-ray plates, illustrations from texts and magazines, microscopes and prepared slides, projection microscope, reflectoscope, lantern slides, necroscopy, individual patients.

TEXT- AND REFERENCE BOOKS²

Group I.

- Adami and McCrea, Textbook of Pathology.
Councilman, Disease and Its Causes.
Gibson, Clinical Technic for Nurses.
Hawk, Physiological Chemistry.
Journal of American Medical Association.
McCollum, Textbook of Pathology.
Osler, Practice of Medicine.
Todd, Clinical Diagnosis by Laboratory Methods.

Group II.

- Cabot, Clinical Diagnosis.
Mallory, Principles of Pathologic Histology.
Rosenau, Preventive Medicine.
Mathews, Physiological Chemistry.
Stevens, Practice of Medicine.

Group III.

- Delafield and Prudden, Textbook of Pathology.
French, Index of Differential Diagnosis.
Krehl, Practice of Medicine.
Wood, Chemical Microscopical Diagnosis.

²Group I is composed of books considered essential; Group II of those distinctly helpful; and Group III of those helpful for wider reading.

Reprints of this outline may be obtained from Headquarters, National League of Nursing Education, 370 Seventh Avenue, New York City. The price is ten cents per copy. A discount of 25 per cent. will be allowed on orders of 25 or more.

ADDRESSES WANTED

The copies of the 1924 Report of the National League of Nursing Education, mailed to the members listed below, have been returned because of incorrect address. If these members will promptly notify Headquarters, National League of Nursing Education, 370 Seventh Avenue, New York, N. Y., of their proper address, their reports will be forwarded at once. The addresses given are the last ones known:

- Dora M. Barnes, 1111 Forest Avenue, Ann Arbor, Mich.
Helen D. Sieck, Wausau Memorial Hospital, Wausau, Wisconsin.
Menia S. Tye, Fort Smith, Ark.

VENEREAL DISEASE INSTRUCTION

The Educational Division of the Canadian Social Hygiene Council has prepared a series of six lectures to be used by Schools of Nursing in teaching the subject of Venereal Diseases. The lectures as outlined are intended to be only suggestive but might properly be given in their entirety, lacking a well qualified lecturer or instructor. The subject is one that has been neglected in many schools although every nurse, willingly or not, deals with venereal disease sooner or later. The topics are arranged as follows: (1) History and Distribution of Venereal Disease, Gonorrhea in Men; (2) Gonorrhea in Women and Children; (3) Syphilis in Adults; (4) Syphilis in Children; (5) Social and Economic Aspects of the Venereal Disease Problem; (6) Legislation Dealing with Control of Venereal Disease.

THE WONDERFUL STORY OF LIFE

The Wonderful Story of Life,—a mother's talks with her daughter regarding life and its reproduction. This is a very carefully written pamphlet of 20 pages issued by the United States Public Health Service which may be procured at five cents per copy from the Superintendent of Documents, Government Printing Office, Washington, D. C.

"FOLLOW-UP" SYSTEMS

Two valuable studies of this subject have been made and published. "A Study of the Value of a Follow-up System in a Syphilitic Clinic," by Henry A. Fisher, M.D., appeared in the *Journal of Social Hygiene*, November, 1924. It is clear-cut, specific and gives a careful computation of the cost of follow-up by mail. Reprints at ten cents per copy may be obtained from the American Social Hygiene Association.

"What Do You Mean by a Follow-up System?" by Ethel C. Taylor, is a very careful analysis of procedure, accomplishment and cost which appeared in *The Modern Hospital*, July, 1924. Reprints may be obtained on request, from Associated Out-Patient Clinics, 17 West 43rd Street, New York City.

DEPARTMENT OF RED CROSS NURSING

CLARA D. NOYES, R.N., DEPARTMENT EDITOR
Director, Nursing Service, American Red Cross

ECHOES FROM THE STORM AREA

BRIEF REPORTS were given last month of the tornado that devastated seven of our mid-western states, but not until after the *Journal* had gone to press did detailed accounts of the work of relief reach National Headquarters. Red Cross Nurses may well be proud of the record set in the response to the call. Altogether 216 enrolled Red Cross nurses were employed in the storm area, with four student nurses from Anna State Hospital. Their duties embraced every phase of public health duty from bedside care and assistance at dressing stations to sanitary inspections.

Red Cross is in a much better position to handle such situations now than ever before. Our local Red Cross Nursing committees gave valiant proof of this fact in the promptness and efficiency with which they secured recruits. With a state supervising nurse already in the field, with chapter nurses and the proper nursing direction from the Branch or National Office, it was demonstrated that the minimum of delay and the maximum of service may be obtained by the utilization of this machinery.

The reports of Olive A. Chapman, Director of Nursing Service in the disaster areas of Missouri, Illinois and Indiana, and of Mrs. Elsbeth H. Vaughan, Director-Assistant of the Midwestern Branch Office, St. Louis, tell of dispatching from the Branch office in St. Louis, of Caroline Manger,

Nursing Field Representative for Illinois, to the devastated district and how shortly thereafter (on March 18) three of our other Nursing Field Representatives with a group of nurses, left with Mr. Baker for Murphysboro, Ill.

In every instance, writes Mrs. Vaughan, the organizations and hospitals gave their most efficient personnel. Miss Goldsmith, Chairman of the Local Committee and Director of the City Nurses, was one of the first to volunteer.

Throughout the evening of March 19, the Branch Office was busy recruiting nurses and giving information. The efforts of all nurses during the first thirty-six hours were concentrated on immediate relief work; as assisting in setting up emergency hospitals, working with physicians and giving nursing care.

HOSPITAL FACILITIES

According to the opinion of nurses who served in the World War, the number of wounded and the general situation was comparable to that following a battle in Europe.

Civilian hospitals, even though utilizing every inch of space by placing cots in halls, basements and rooms not ordinarily used for patients, were soon taxed beyond their most elastic limit. Carbondale, Herrin, Murphysboro, Carmi, Benton, West Frankfort, Johnson City, Princeton and Evansville, the principal towns in the stricken area, rallied gallantly to the call. But the establishment of emergency hospitals was an obvious necessity and two were at once set up in Murphysboro and one each in West Frankfort, McLeansboro and Benton. One of the largest homes in

Owensville, Indiana, was also converted into an emergency hospital.

Equipment was supplied and patients were made as comfortable as possible. Staffs usually consisted of two nurses and four doctors assigned to the larger emergency hospitals, with helpers to make dressings, etc. An average of eighty-six dressings a day was the rule.

DRESSING STATIONS AND PUBLIC HEALTH UNITS

For the benefit of those who were able to leave the hospital after a few days, dressing stations were opened in Murphysboro, West Frankfort, Gorham,—all Illinois towns—and in Griffen and Annapolis, Mo. With the return to the stricken localities of the refugees, after the first shock had abated, the Red Cross realized the necessity of establishing public health nursing units and ten of these, together with five milk stations, were opened, the latter under the supervision of the Medical Director.

Though the extent of the area and the large number of centers made the work extremely difficult of administration, nevertheless the medical and nursing directors personally visited every such storm center, calling at hospitals for information regarding the patients and on doctors and nurses for advice and supervision.

In the Murphysboro section, Margaret McGreevy, Field Nurse, Nebraska, was delegated to check up each hospital, ascertain what nursing care was being given—whether temporary or permanent—and attend to complications tending to prevent effective service to the injured. After the arrival of Miss Chapman she was sent to make a survey of conditions and needs to be met by Red Cross.

RELIEF COMMITTEE AND PROGRAM

The Relief Committee was made up of chapter officers and interested persons. Mr. Baker's presence on the scene and his reassurances went far toward restoring their morale, and the committee at once accepted Red Cross as the official relief agency.

A feature of the relief program was the close coöperation between representatives of the State Board of Health and those of the American Red Cross Nursing Service. Visits under their joint supervision were made to all schools in the storm-stricken area. A record form designed for the sanitary inspections which the Public Health Nursing Units were carrying on is still in use and will prove invaluable for some time to come.

The State Health Officer was called in early but was detained in other places. His decision on the wells and cisterns was, first to immunize every one wishing to be immunized. This was done by the family physician and follow-up work at each farm by a health officer. As the people go back to their localities the Relief Committee decided to clean wells for them and the Farm Bureau, through the State Department of Health, provided chlorinization.

Quick action and promptness in forwarding supplies to the various distributing stations was invaluable in re-establishing faith in Red Cross. So far as possible hospital supplies, linen, drugs, enameled ware, etc., were purchased locally, a field nurse being delegated to canvass the town for such necessities. At the same time a check was made on available articles for homes or temporary houses not included in the emergency supply.

A CLOSE-UP FROM A FIELD NURSE REPRESENTATIVE

Extracts from the report of Miss McGreevy on the survey she was commissioned to make in White County vividly picture conditions found existing and remedial measures taken. Incidentally they bring out the fact that the spirit of the old tradition that pledged nurses of the generation now passing to duties sometimes menial and often taxing to the utmost her abilities as a pioneer and a housewife, still pervades the newer school. The example of the two young graduate nurses from Chicago, gallantly improvising the simplest necessities of domestic living in the one-room schoolhouse, is both touching and inspiring.

There was still great need of helping keep up morale. Many suffered from nervous shock. They could make no plans for themselves and the future looked very dark. Men trembled and cried when they spoke of their losses, human and material. Assurance that Red Cross would help them kept many from breaking down. It was hard in the beginning for them to believe that the Red Cross would not require a mortgage.

The only infectious disease prevailing all spring was influenza. One day we found one member of a family of five ill, with a temperature, sore chest, etc. Next morning all five were in bed. They had saved enough of their household goods to set up housekeeping in a one-room country school. All had been exposed during the storm to rain and hail. We sent them two nurses who made the best of things, caring for the patients, cooking and washing and even chopping wood. These were young graduates from Chicago. They kept their patients happy in spite of conditions and helped them to forget the storm. They were with them until other arrangements could be made. These were all serious cases of influenza. Supplies were brought to the schoolhouse every day by the chairman of the committee and the field nurse.

The stricken territory in this (White) Coun-

ty was all farming, no town having been in the path of the storm. The path was about one to two miles wide and went diagonally across the county which is about 24 miles across. It killed 27 persons (two more afterward died), injured about 160, some seriously, and levelled about 60 homes, damaging approximately 20 others. In all some 400 people were thrown out of work and left without roofs over their heads.

At the County House, where indigent elderly people are housed, there was sufficient equipment to start an emergency hospital, likewise plenty of room. Additional beds and other articles were purchased by the local committee and I found 23 seriously injured persons being cared for there. The only graduate nurse in the county was in charge with all of the seven practical nurses in town assisting her. Evidence of good nursing care and medical attention was apparent, but the nurses had little relief. Two additional graduate nurses were sent in by Red Cross that day and two others requested.

NATURE OF INJURIES

According to Miss McGreevy's report, infirmary cases included 15 fractures, several compound, bad lacerations, fractured skulls, stick punctures, injured eyes, pneumonia from exposure and deep cuts and bruises. Anti-tetanic serum had been given to all, as well as to every one found in the country.

Several bad cases in homes were reported—persons who did not wish to go to the infirmary. Nearly all of the other cases were being attended to by the doctors making individual calls, or by the patient making trips to the doctor.

Eight physicians in the county were on duty with the storm sufferers until every one was cared for, no one charging anything for the service.

INSIGNIA

Many compliments have been received as to the appropriateness and beauty of the insignia worn by our

nurses during the relief work. Hospital nurses were instructed to wear white uniforms with the Red Cross insignia on the arm. Public Health Nurses wore gray, with the same insignia. The Red Cross emblem was permitted only to enrolled Red Cross Nurses.

HOME HYGIENE AND CARE OF THE SICK FOR THE BLIND

One of the most popular and rapidly expanding services in the American Red Cross is the course in Home Hygiene and Care of the Sick. Its value as a nation-wide agency in disease prevention and the upbuilding of higher standards of personal and community health can scarcely be overestimated. But nowhere, perhaps, has it established a more valuable contact than in the schools for the blind. Often these sightless pupils come from remote rural communities, to which, armed with the instruction received in the course, they return as veritable missionaries of health, carrying the gospel of correct habits of personal and household hygiene to the members of their own families.

It was in the Kentucky School for the Blind, at Louisville, that such instruction was first given. Mary K. Coady, at that time director of the Red Cross Teaching Center in the Louisville Chapter, was the instructor. The papers turned in by the ten who finished the course in the spring of 1921 were of more than usual excellence.

During this same year three other classes were organized in the State School for the Blind at Kansas City, Kansas, under the instruction of Marjory Malloy. One was a group of fifteen girls, another included 20 boys, and the third was made up of teachers, ten in all, of whom four were blind. The

course was a modified one especially stressing personal hygiene, a most necessary measure to prevent illness among the students.

A class of blind Girl Scouts, taught by Luella Olson, a Community Nurse of the Visiting Nurse and Welfare Association of Faribault, Minn., is the latest class of this kind to be reported. Procedures, according to the report sent in to Mrs. Isabelle W. Baker, Director of Home Hygiene and Care of the Sick, have been to read the lesson aloud to the pupils. Then, as soon as possible, she passes on to the demonstrations, which seem to hold their attention far more than the readings.

"I then take each pupil individually," she explains, "let her follow the movements of my hands as I go through the various procedures, bed making, bathing the demonstration doll, bandaging, etc."

Another interesting class was formed at the Western Pennsylvania School for the Blind, Pittsburgh, comprising 21 pupils, of whom 14 had previously had six lessons in practical work. Here the procedure was to have the Hygiene instructor read the lesson during study periods once a week. The Red Cross Nurse Instructor, F. Elna Smitten, then took over the class, the pupils placing their hands on hers as she demonstrated.

The students took notes in Braille. When the examination time came, seven, who had not yet learned to transcribe their Braille notes on the typewriter, submitted them in the original Braille form. These papers are now at Red Cross National Headquarters and are among the most interesting and touching records ever received from a class in Home Hygiene and Care of the Sick.

STUDENT NURSES' PAGE

WHAT I HAVE LEARNED FROM MY PUBLIC HEALTH EXPERIENCE

BY MELBA MAUER

St. Louis City Hospital School of Nursing, St. Louis, Mo.

IT WAS with some misgiving that I started on public health work. To me there was no greater or more needful work for a woman to do than nursing sick, helpless patients, little children, mothers with their new babies, or feeble old men and women. I was to leave all this; not even to give bedside care, but just visit people and talk to them—not much to that, I was sure.

But these two months have taught me something very different. All the theories we have been storing up during the past three years have at last found a practical use. Classes, reading, going over records, and field work have given me an entirely different understanding of a nurse's usefulness. Visiting the homes of children and tuberculous patients, showed the great need of teaching, not only health, but sanitation

and nutrition as well, to those who were not sick, but who would become so if conditions were not remedied. It was a great relief to know that there is such splendid coöperation among the different organizations to which social problems can be referred.

I cannot but feel that even the most discouraging conditions are helped in some way by the visits of a nurse. Most of the people I visited were very friendly and anxious to do all they could to carry out the doctors' and nurses' directions and then there were always results, which were generally favorable.

The value of a friendly spirit has impressed me greatly. I want to go back with a more sympathetic attitude toward hospital patients and try to teach at least some rules of health and disease prevention while working among them.

THE BENEFIT DERIVED FROM PSYCHOLOGY

BY FRANCES ELLIOTT

St. Vincent's Nursing School, Portland, Oregon

“KNOW THYSELF” has always been a wise maxim. Delving into the study of one's self—our habits, our thoughts, our emotions, our instincts, our behavior,—all that is in the mind of man, will ever be accompanied by the keenest interest. In a series of splendid lectures, delivered to a class of young student nurses at St. Vincent's Hospital of Portland, Oregon, Sister revealed the importance of psychology as related to the nurse, her associates and her patients.

The group of young nurses learned that their patients needed more than mere physical care; that the average unfortunate one who is sick in body is also sick in mind and the resourceful nurse will often need to bring much of her knowledge of psychology to her aid in restoring her patient to health.

To do justice to her patients, a conscientious nurse will also find it necessary to apply the study of the theory of mind to herself in her daily life. Habits, it was learned, are repeated acts.

A young woman in a nursing school who takes it upon herself to form right habits of obedience, promptness, truthfulness, thoroughness, kindliness, and most of all, spelling "self" with a little "s," is the one who will become the most desired nurse and who will find the most happiness in her chosen profession.

Sister's most interesting and appreciated lecture can best be summed up in her own words:

Action forms habits. Back of these actions lies interest. In action is the seed of habit. Ahead of action lies behavior. Behavior grows into conduct, conduct into character and character into destiny—that is the sum total of every life.

OUR CONTRIBUTORS

The authors of the "Appreciations" of Miss Nutting's work can acquire no added lustre by mention here. **Dean Russell** is known to all the nursing world as the man whose staunch and understanding support made possible the great development of nursing education at Teachers College. **Isabel M. Stewart, R.N.**, her brilliant student, friend and colleague, succeeds Miss Nutting. **Georgia M. Nevins, R.N.**, classmate, friend and confidante, is widely known as administrator and Red Cross worker while the name of **Lillian D. Wald, R.N.**, internationalist, is synonymous with Henry Street and all that it implies to the health of the world.

Lucy Minnigerode, R.N. (See *Who's Who* for September, 1924.)

E. Nora Nagle, R.N., is assistant to the Directress and Instructor in Nursing in the Evanston Hospital School for Nurses. She is a graduate of the school of the Royal Victoria Hospital, Montreal, Canada.

Nan H. Ewing, R.N., has contributed a number of articles to the *Journal*. She is Superintendent of the Ravenswood Hospital, Chicago, Ill.

Isabel Chipman, R.N., who writes so appreciatively of Fairview is an "honest to goodness" private duty nurse who graduated long ago from the School of the Boston City Hospital. We hope she will write for the *Journal* again.

Hon. Hugo Hirsch is a prominent member of the New York Bar and president of the

Board of Managers of the Brooklyn State Hospital.

Martha Koehne of Seattle continues in this issue her entertaining but none the less scientific discussion of Obesity.

Josephine Kinsey, R.N., a graduate in Home Economics of Cottey College, and of Washington University School of Nursing, is supervisor of the obstetrical service at Barnes Hospital, St. Louis (Washington University School of Nursing), and **Dr. William J. Dieckmann** is Instructor in Obstetrics in the Washington University Medical School.

Helen F. Hansen, R.N., puts her ideas on Teaching Hygiene to practical use in the school of the California Lutheran Hospital, Los Angeles.

Married nurses must surely be interested by **Christine Williams Paul's** description of the Nightingale Club at Riverside, California. Mrs. Paul is a graduate of the School of the Toledo General Hospital and held a number of important teaching and executive positions before her marriage.

Luella Purcell, R.N., is an active member of the Alumnae which makes good use of the room she describes.

Marion Julia Faber, A.B., R.N., is an instructor in the Jewish Hospital School of Nursing of Cincinnati, Ohio. She is a graduate of the Leland Stanford University, California, and of the School of Nursing and Health, University of Cincinnati, class of 1922.*

LETTERS TO THE EDITOR

The editors are not responsible for opinions expressed in this department. Letters should not exceed 250 words and should be accompanied by the name and address of the writer.

A PRACTICAL DEVICE

DEAR EDITOR: While on a cardiac case recently, the patient, being unable to lie down, slept with his head on his chest, which hindered breathing, besides waking him as his head bobbed around. Picking up a soft wool scarf which he had worn around his neck to avoid draught, I rolled it into a small light roll long enough to extend out on both sides, covered it with a linen handkerchief, and pinned it with safety pins at each end to his jacket, just so that his chin rested on it, when his head was halfway down. Much to my surprise, the day nurse as well as the patient said it was the best thing they had seen. Dr. Louis F. Bishop, calling to see his patient, suggested I pass it on to the *Journal*. I trust others may be helped by this, as I have been by other articles I have read in the *Journal*.

New York

M. LOIS SMITH, R.N.

THE OLD-FASHIONED PRIVATE DUTY NURSE

DEAR EDITOR: Has anybody missed her? Let me say she is enjoying private duty nursing as much as ever. A major operation a little over a year ago did not disqualify her. It is much more enjoyable to nurse the sick than to be sick and be nursed. What if hours off duty have to be sacrificed once in a while in a case of critical illness in a home? The patient's life may not depend on whether she gets that hypodermic just on time, but had she not gotten it and not recovered, would not the family always hold it against the nurse? And I want to ask, is there anything that would make up for the gratitude of a patient recovered from a critical illness. Doctor and patient join in praising the nurse when, after all, she has only done her duty. All the happy experiences with children! Who gets them like the private duty nurse? There have been times when I have wished I had fitted myself for something else, but I know there is nothing I would rather do and I hope to keep it up for many more years. It is only twenty-one years since I graduated and I am still learn-

ing. Could we not hear from some other old-fashioned private duty nurses? I know I am not the only one.

Missouri

A. S.

HOW THE PENNY GREW

DEAR EDITOR: In the fall of 1924, our Senior Doctor perceived a penny in a chair that had been occupied by a visiting member of the staff. He picked it up and put it on the window sill, where it remained until February. At that time the Assistant Medical Examiner added another penny, and a rhyme—

If an apple a day keeps the doctor away
And an onion a day keeps every one away,
A penny a day buys a record for the nurses
to play.

After we got the record, but there were three, the word radio was substituted for record and contributions poured in,—doctors, superintendents and nurses contributing freely. A glass jar was in service and a list was printed. The chance to do something big in a little way was appreciated. The matter was placed in the hands of the treasurer of the hospital and we now have a splendid radio which is so fascinating that we listen morning, noon and until late evening.

Massachusetts

A. E. MAC. D.

NURSES AS STEWARDESSES?

DEAR EDITOR: I was much interested in a letter to the Editor in the April *Journal*. Why should graduate nurses in good standing in their profession wish to act as stewardesses on ocean liners? Is there not enough work in their own line? Is it not just as reasonable to ask them to act as hotel chambermaids? The work is the same. Last summer I made a trip as ship nurse on one of the United States Line boats. There is a well marked boundary between nurses and stewardesses, although the latter do wear white uniforms and caps. Several of the stewardesses informed me that they were graduate nurses waiting for positions as nurses on the ship. I learned from the Surgeon-in-Chief of the Line that anyone who

had been employed as a stewardess would never be signed on as a nurse on that line. Salary alone cannot "drag our profession down" to the level of a menial position.

New York

I. M. F.

A DISTORTED VIEW?

DEAR EDITOR: We hear rather severe criticism of nurses and sometimes wonder why. It is true, indeed, that the pupil nurse of today is no longer a serious, mature woman. Nothing seems to be taken seriously by her because nothing matters, not even correct forms of etiquette. I was shocked, indeed, when entering a dining room of a modern hospital, to find many nurses with elbows lazily flung on the table while eating, fingers being licked, heads being put down to coffee cups, instead of cups being lifted. The use of the knife was apparently much misunderstood, as it was used to "shovel" food into the mouth. Throwing things across the table seemed to be a happy pastime. Poor English is another thing to be criticized. I wonder why that letter "g" is attached to the words, "coming, going," etc., if it is not to be used. That poor little word "don't" is so often abused—while "ain't" seems to have become a member of the English language. Recently I met a nurse who was dismissed from a home where she was nursing a sick child. The mother said she was a wonderful nurse, but her English was shocking, and the child was beginning to make the same errors. We think these are small

matters while we are in training, but when we get out into the world it is the "little things" that count. If we are old enough to enter training, surely we are old enough to be particular about our English and our table manners and we should not forget that "slang" only lowers our standard, instead of raising it.

C. B.

JOURNALS ON HAND

Genevieve Gillespie, 111 North Pearl Street, Tecumseh, Mich., has copies of the *Journal* which she will sell for five cents each and postage: 1908, January, May through August, November, December; 1909, January, February, April through October; 1910, May through December, except October; 1911, January through July; 1912, January through March; 1914, April through December; 1915, all except July; 1916 through 1923, complete.

Elizabeth Lindheimer, Lenox Hill Hospital, New York, reports a supply of *Journals* on hand: 1901, February, April, June, August, September; 1903, March through September; 1904, January, February, September through December; 1905, January through September, 1906, all but March; 1910, August, September; 1911, May, July through November; 1912, June, August; 1913, May, December; 1914, September through December; 1915, all but October; 1916, January, February, May, June, September, December; 1918, January, June through August, October, November; 1919, April through June, September, November.

NEEDS AND STANDARDS OF OUT-PATIENT SERVICE

This handsome leaflet is issued by the Associated Out-Patient Clinics of New York City. The subject is outlined under the sub-headings:

I. Unity of hospital and out-patient department.

II. Number of patients proportioned to facilities.

III. Adequate records.

IV. Sufficient laboratory service.

V. Trained assistants for the physicians.

The five fundamental standards are given as follows:

1. The out-patient and the bed services should be regarded as intimately associated phases of hospital work and should be unified as fully as possible as to medical staff and as to administrative organization.

2. The number of patients accepted for care

should be limited and regulated according to the facilities of staff, space and equipment.

3. Adequate records should be maintained of the medical work, the attendance, and the income and expenditure. All the medical records of a patient should be filed together.

3. Adequate laboratory service should be made available for the out-patient department.

5. Nursing service, social service, and clerical service should be provided. Physicians should be able to devote their time to their patients and be freed from mechanical and clerical duties.

These standards are not theoretical. A number of the fifty-four out-patient departments of hospitals which are members of the Associated Out-patient Clinics have one or more of these principles in actual operation; several have adopted all of them.

QUESTIONS AND ANSWERS

The editors will welcome questions and will endeavor to secure authoritative answers for them.

7. How can a hospital which cannot get a classification from the College of Surgeons have a recognized school of nursing and be classified in Class B?

Answer.—The plan of national scope for grading schools of nursing by a method somewhat comparable to the grading of hospitals by the American College of Surgeons is not yet fully developed. The plans for grading schools of nursing now in effect have been developed by individual states. The aims of the College of Surgeons and the aims of the state boards of nurse examiners are not identical. The former focus attention on laboratory facilities, records, organization, and matters pertaining to the scientific medical care of patients. These are of importance to the school of nursing, of course, but the schools are supposed to be graded on the facilities for teaching student nurses and on the quality of the instruction. Types of cases, quality of nursing supervision, equipment of class rooms and living conditions for students are carefully evaluated. It is quite conceivable that a hospital approved by the College might have a very weak school of nursing, it seems less probable that a hospital not recognized by the College would have a good school of nursing. The question is a good one. Nurses might easily be misled by thinking that a hospital accredited by the College would naturally have a good school. It is time we separated the hospital and the school, in our thinking, at least. The plans for a national grading of schools of nursing now under way, and discussed in the last few issues of the *Journal*, indicate hope of a real solution for many such problems.

8. What would you think of a superin-

tendent of nurses in a training school who, when asked to join the district and state associations, replied "There is nothing to it, it is just a question of giving a few dollars?"

Answer.—Such persons fail to recognize that much of the prestige they enjoy as professional women and as registered nurses is due to the work of the professional organizations. Legislative action, for example, is brought about through the collective strength of large numbers of nurses and by the worth of their collective service. Such nurses seem to follow the very human tendency to take something for nothing, if they can get it, but they lay themselves open to the question, "Are they really professional nurses?"

9. What is the routine work of an office nurse? What are the hours? What is the salary? Are complete courses in stenography and bookkeeping required?

Answer.—The work of office nurses is far from standardized because the requirements of the employing doctors vary with their specialties and their localities. Usual duties are the making of appointments, preparing for and assisting with examinations and treatments, care of instruments and other equipment. Surgeons sometimes require their office nurses to assist with operations in homes and even in hospitals. Hours are usually from 8 or 9 to 5. These may be irregular if the nurse is expected to assist with operations or if she is charged with the responsibility for securing nurses when required by the practice of the doctor. The registrars consulted on the subject express the opinion that "complete knowledge" of stenography is not required but that some knowledge is essential.

TYPHOID—AGAIN

Just when municipal health officials were coming to look upon the typhoid fever problem as a thing of the past, it has bobbed up again in an unexpected fashion. There has been no increase in Boston during the past year, but in many other large American cities typhoid fever has shown a marked increase both in prevalence and in virulence. There has also been noted a curious tendency for the disease to occur not among the poor, but among the well-to-do and wealthy. This fact

has led to a presumption that the cause might be found in a difference in the dietary habits of the poor and the wealthy—that the wealthy might be in the habit of eating uncooked, some food which the poor ate cooked, or of eating some possibly contaminated articles of food which the poor did not eat at all. This process of reasoning has naturally brought shell fish, oysters or clams, on the half shell, under suspicion.—Bulletin of the Boston Department of Health.

WHAT TO SEE ABROAD

(Continued from the May JOURNAL)

Norway.—The Norwegian Nurses' Association has a most dignified headquarters at Universitetsgaten 12, Oslo. The building was formerly one of the pretty old residences of the capital. Besides providing space for offices, club rooms, etc., it also contains a dietetic restaurant. In Oslo the largest hospital in Scandinavia is found, the "Ullevaal Sykehus," which among other attractions has a very large and modern Nurses' Home. The beautifully situated Grefsen Sanitarium, the open air school "Brusetkollen," and many other interesting places in Oslo as well as in other cities of Norway can be visited under the leadership of Norwegian nurses by applying to Sister Bergliot Larrson, President of the Norwegian Nurses' Association, 12 Universitetsgaten, Oslo.

Sweden.—Sweden has a greater number of large-sized cities than the other Scandinavian countries. In its beautiful capital, Stockholm, the "Sophiahemmet" (the St. Thomas's Hospital of Sweden) ought certainly to be visited. "Sabbatsbergs Sjukhus," Maria Sjukhus, the Red Cross Nursing Home, and a number of other institutions are also of interest to nurse visitors.

The following hospitals outside the capital are especially recommended to foreign visitors:

At Malmö: Allmanna Sjukhuset.

At Lund: Lasarettet.

At Gothenburg: Allmanna och Sahlgrenska Sjukhuset. Barnsjukhuset (for children).

At Uppsala: Akademiska Sjukhuset.

Mental nursing is highly developed in Sweden and is required for state registration. The titles which apply to hospitals specializing in mental disorders in Sweden are the "Hospital" or the "Asyl," and hospitals of this type are found at Lund, Gothenburg, Uppsala, and Stockholm.

The Swedish Nurses' Association, Barnhusgaten 6, Stockholm, will be glad to assist foreign nurses desiring to visit institutions in Stockholm as well as in other cities of Sweden.

Denmark.—Copenhagen has from the architectural standpoint some very beautiful hospi-

tals. The "Bispebjerg Hospital," with its splendid, unusually large, and well kept grounds is one of the sights of the capital. The architecture of the "Rigshospital," built a few years before the recent War, has been imitated in different countries of Europe as well as of America; by means of a special arrangement the patients are given more privacy by dividing the large ward into smaller units without interfering with the practical management of the ward as a single unit. The hospital is connected with the University of Copenhagen and has a School of Nursing as well as a School for Midwives. "Finsens Lysinstitut" (light therapy) and "Hjemmet for Vanføre" (institution for crippled and deformed) are worth seeing. Those interested in mental nursing ought to visit the "Nykjöbing Sjaelland Sindssygehospital" or the "Sankt Hans Hospital" at Roskilde, both situated a few hours by train or automobile from Copenhagen. In Jutland the Aarhus Municipal Hospital, Aarhus, is very well equipped.

Denmark is one of the countries of the world having the lowest mortality rate in tuberculosis. Different kinds of preventive work are done and institutions for the treatment of tuberculosis are provided, in which there are beds for 107 per 100,000 inhabitants of the country. In Jutland the "Vejlefjord Sanatorium" in beautiful surroundings and the "Julemaerkesanatoriet" for children at Kolding built from Christmas seal money, are worth visiting. Near Copenhagen the "Boserup Sanatorium" and in the capital itself several tuberculosis dispensaries (Tuberkulosestationerne) will be of interest to nurses.

The headquarters of the Danish Council of Nurses, Frederiksborggade 29, Copenhagen, welcomes foreign visitors and will be very glad to assist them in any way possible.

Great Britain.—London has much to offer to nurse visitors, for those who are especially interested in the past as for those who prefer the present. At the Florence Nightingale Training School for Nurses at St. Thomas's Hospital, beautifully situated on the south side

of the Thames, opposite the Houses of Parliament, there are a great number of pictures of the life of Florence Nightingale as well as several of her belongings. Those interested should also pay a visit to South Street, Park Lane, London W., and stop at Number 10, where Miss Nightingale lived during the latter part of her life and died in 1910. Her modest grave is in the little country churchyard at East Wellow, Romsey (three hours from Waterloo Station, London), near Embley Park where she lived with her parents. There are various memorials of Miss Nightingale throughout the country, the best known is the bronze statue in Waterloo Place, London, at its junction with the Pall Mall. The statue of Edith Cavell is at the junction of St. Martin's Lane and Trafalgar Square, London, and her grave is in the cloisters of Norwich Cathedral.

London has a great number of fascinating hospitals, several of them having a history of a few hundred years or more. Besides St. Thomas's Hospital mentioned above, St. Bartholomew's, Guy's, University College and London Hospital are the best known. Their huge out-patient departments from which a splendid work is done for the community are not the least interesting departments of these institutions.

No nurse interested in Child Welfare work and staying in London should omit visiting Sir Frederick Truby King's London Hospital. It has just moved to the historical quarters, Cromwell House, Highgate, London. The visiting day is Wednesday, 2-4 p. m., but by phoning arrangements can be made for other times. (Phone: Mountview 2100.)

Almost all the larger cities of Great Britain have hospitals and institutions worth visiting. Best known of these are probably: in Scotland, the Royal Infirmary of Edinburgh and the Royal Infirmary of Glasgow; and in England: Leeds General Hospital whose School of Nursing in connection with Leeds University gives a diploma in nursing.

As the space here is strictly limited, foreign nurses visiting London are advised to obtain further information concerning institutions to visit from the following organizations which will be glad to assist them: The National Council of Trained Nurses of Great Britain, 431 Oxford Street, London W.; The

Royal British Nurses' Association, 194 Queen's Gate, London S. W. 7; The College of Nursing, Ltd., 7 Henrietta Street, Cavendish Square, London W. 1.

Holland.—In Amsterdam the "Wilhelmina Gasthuis" and the "Binnen Gasthuis" are very good general hospitals. The largest mental hospital of Holland, "Het Provinciaal Ziekenhuis, Santpoort," is situated in the dunes not far from Amsterdam; it has a most interesting department for occupational therapy. In The Hague the "Gemeente Ziekenhuis" as well as the "Sea-Hospitium at Katwyk" (a special kind of open-air school), will arouse interest. Rotterdam has the old "Coolingel Gemeente Ziekenhuis" and the new but smaller "Bergweg Gemeente Ziekenhuis" which will attract nurse visitors.

Those interested in obstetrics should visit the schools for midwives (Vroedvrouwen School) in Amsterdam and Rotterdam.

The Dutch Nurses' Association "Nosokomos," P. C. Hooftstraat 97, Amsterdam, will be very glad, indeed, to have foreign nurses come to their headquarters and is anxious to arrange visits to different institutions for them.

Belgium.—In Brussels it is recommended that tourist nurses visit the "Edith Cavell-Marie Depage Training School for Nurses," "l'Ecole d'Infirmières Saint Camille," and "l'Hopital Brugmann Jette." The "Association des Infirmières Visiteuses de Belgique" (special school for Public Health nurses), and the Public Health and Sanitation Department of Schaerbeek (a suburb of the City of Brussels) are also worth seeing. Brussels brings naturally to our memory the life of Edith Cavell. In the Prison de Saint Gilles, the cell can be visited where she was imprisoned and in Le Tir National is the place where she was executed.

The following institutions will probably be of special interest outside the capital: At Antwerp: Hospital du Stuyvenberg, Hopital Louise Marie (for children), Maison Maternelle (19 rue des Capucines).

At Ghent: Great and Little Béguinages (built 1234-'35).

At Bruges: Hopital Saint Jean (mediaeval building and fine modern equipment).

At Liège: Oeuvre des mères et des Tout

Petits, rue Strailhe (home for mothers and boarding out babies under supervision).

At Jumet: Public Health Demonstration Center of the League of Red Cross Societies.

The Fédération Nationale des Infirmières Belges, Rue de Joncker 47, Brussels, is very gracious to visitors and will be glad to give any kind of information and arrange to have Belgian nurses accompany them to the different institutions to be seen. A special permit has to be granted by the government for the visits to a few of the above-named places. To prevent having to ask for permits at too many different times, the association would appreciate being informed as early as possible in order to make all the arrangements at one time.

France.—Paris, with its beautiful art collections and its many unusual attractions of all kinds will naturally make a highly crowded program for any visitor. Nurse tourists should, however, not allow themselves to leave Paris or France without having given some time also to their professional interests. A very good advisor for professional sightseeing is the Secretary of the French Nurses' Association, Mlle de Joannis, 10 Rue Amyot, Paris, who is herself the head of the School of Rue Amyot, one of the prominent Schools of Nursing in France.

Institutions known to all of us through the History of Nursing as for instance "Hotel-Dieu" and "La Salpêtrière as well as those of newer origin as Mlle Chaptal's School, 66 Rue Vercingétorix, Paris XIV, ought to be visited. The Headquarters of the League of Red Cross Societies, 2 Avenue Velasquez, Paris VIII, is also well worth including in nurses' travelling itinerary. The splendid medical institutions as well as those for social work will naturally attract a number of nurses. All those interested in Maternity and Child Welfare work ought to visit l'Ecole de Puériculture, 64 Rue Desnouettes.

France outside Paris has also a great number of professional attractions for nurses. Beaune—on the main line of the Paris-Lyon railway—has a beautiful and picturesque "Hotel Dieu" (founded 1443), which though it is largely built of wood, is still exceedingly well preserved. Those interested in social work done by "the Society of Friends" ought to visit Maison Maternelle de la Marne, 47

Avenue de Strassbourg, Chalons-sur-Marne. Some unusually excellent Public Health work is being done by the "Association d'Hygiène Sociale de l'Aisne," Soissons, Aisne, and by "Département de la Seine-Inférieure," 14 Rue Crevier, Rouen.

Nobody having any opportunity to do so should miss a visit to the Florence Nightingale School for Nurses, 21 Rue Cassignole, Bordeaux, the French pioneer school for skilled nursing adapted after the methods of Florence Nightingale, with its "American Nurses' Memorial."

Austria.—No nurse passing through Vienna should miss a visit to a few of the most prominent hospitals of Vienna. The large "Allgemeines Krankenhaus," Spitalgasse 23 (Oberin Helene Sternberg) is interesting and its School of Nursing has an unusual wonderful teaching equipment. Professor V. Pirquet's Kinderklinik (Oberschwester Hedwig Birkner) needs no recommendation.

To the "Rotes Kreuz-Spital Rudolfinerhaus," Billrothstrasse 78, Vienna (Oberin Dominika Piebzcker) belongs the oldest School of Nursing in Austria (founded 1882). The hospital is a private institution and its School of Nursing is progressive and it gives its pupil nurses an unusual "all around" training. Miss Marianne Danko who lives at the Rudolfinerhaus will be glad to be of service to those especially interested in studying Public Health nursing in Austria.

Switzerland.—Little Switzerland has so much beauty to offer to tourists that it can scarcely be expected that they will have time to visit hospitals and similar institutions. Switzerland has no old or historical famous hospitals. The Deaconess institutions belong to the older of the group; they will, however, offer nothing new to those who already know Kaiserswerth.

The most prominent Schools of Nursing in Switzerland are:

At Lausanne: La Source (Chemin Vinet 20-24). The school was founded in 1859 and has since 1924 been under the Red Cross, which is at present reorganizing it.

At Bern: The progressive School of Nursing of the Lindenhofspital (founded 1899) which belongs under the Swiss Red Cross. The Bernische Pflegerinnen-Schule Engeried (founded 1910) which sends its pupil nurses to

"la Maternité Cantonale de Berne," and hospitals at Basel, Niederbipp, and Aarau.

At Zurich: Schweizerische Pflegerinnen-schule, Samariterstrasse 15, Zurich (founded 1900) which is connected with one county and four state hospitals. Some of the nurse tourists will probably be interested in visiting the well known Swiss "Alkoholfreien Restaurants" which have exercised such beneficial influence, or stay for a short time in one of the "Volks Kurhauser" in Zurich ("Kurhaus Zurichberg," Zurich 7. "Kurhaus Rigiblick," Zurich 6). These are situated in beautiful surroundings with view of the "See Alpen," one-half hour

by street car (tram) from the Central Railway station in Zurich.

Schwester Emmy Oser, Feldegg Strasse 66, Zurich 8, will be very pleased to meet and be of assistance to foreign nurses.

Poland.—Miss Helen L. Bridge, Director, School of Nursing, Ul Smolna No. 6, Warsaw, will be pleased to be of service to foreign nurses visiting Poland.

Czechoslovakia. — Miss Sylvia Machar, Directrice de l'Ecole d'Infirmières de l'Etat a Prague, Jecna ul 4, Prague II, will be pleased to be of service to foreign nurses visiting Czechoslovakia.

SUGGESTED READINGS FOR TRAVEL IN EUROPE

- PICTURE TOWNS OF EUROPE. By Albert B. Osborne. Rev. Ed. 1923. McBride, Nast and Company, New York.
- BRONTE MOORS AND VILLAGES, From Thornton to Haworth. By Elizabeth Southwart. 1923. Dodd, Mead and Company, New York.
- *LONDON IN SEVEN DAYS. By Arthur Milton. 1924. Robert M. McBride and Company, New York.
- THE NEW WORLD; Problems in Political Geography. By Isaiah Bowman, Ph.D., Director of the American Geographical Society of New York. 1921.
- SPELL OF FLANDERS. By Edward Neville Vose. The Page Company, Boston. 1915.
- ROMANCE OF THE BOURBON CHATEAUX. By Elizabeth W. Champney. G. P. Putnam's Sons, New York. 1910.
- *A LITTLE BOOK OF BRITANNY. By Robert Medill. 1924. Robert M. McBride and Company, New York.
- ART OF THE LOUVRE. By Mary Knight Potter. 1905. L. C. Page and Company, Boston.
- THE NEW MEDITERRANEAN. By D. E. Lorenz, Ph.D. 7th Edition. 1922. Fleming H. Revell, New York.
- HOW TO SEE THE VATICAN. By Douglas Sladen. 1914. James Pott and Company, New York.
- *A FORTNIGHT IN NAPLES. By Andre Maurel. Authorized English Edition, translated by Helen Gerard. 1921. G. P. Putnam's Sons, New York.
- SPELL OF THE RHINE. By Frank Roy Frippie. 1922. L. C. Page and Company, Boston.
- AS IT IS IN ENGLAND. By Albert B. Osborne. Rev. Ed. 1923. McBride, Nast & Company, New York.
- A THREAD OF ENGLISH ROAD. By Charles Stephen Brooks. 1924. Harcourt, Brace and Company, New York.
- THOMAS HARDY'S DORSET. By R. Thurston Hopkins. 1922. D. Appleton and Company, New York.
- IN UNFAMILIAR ENGLAND WITH A MOTOR CAR. By Thos. D. Murphy. Revised and enlarged edition. L. C. Page and Company, Boston. 1924.
- A WEST COUNTRY PILGRIMAGE. By Eden Philpotts. 1920. The Macmillan Company, New York.
- WORLD TRAVEL SERIES. Frank G. Carpenter.
- *PARIS IN SEVEN DAYS. By Arthur Milton. 1924. Robert M. McBride and Company, New York.
- *SWITZERLAND WITH CHAMONIX AND THE ITALIAN LAKES. Ed. by Findlay Muirhead, M.A., F.R.G.S. The Macmillan Company, London and New York. (A very full and complete guidebook, with 78 maps and plans.)
- THE VATICAN—ITS HISTORY—ITS TREASURES. 1914. Letters and Company, New York.
- *Of a convenient size to be slipped into handbag or coat pocket. This list was compiled by Ruth Charles, Research Librarian, Public Library, Mount Vernon, New York.

NURSING NEWS AND ANNOUNCEMENTS

In the January number of the *Journal*, the Committee on Transportation for the Congress of the International Council of Nurses to be held in Helsingfors recommended that those who anticipate arriving in New York prior to sailing, secure reservations at either the Hotel Earle or the Hotel Holley, as they are most conveniently located to the pier from which the S.S. *Caronia* sails.

Please communicate directly with Mr. S. K. Hill, Manager, Hotels Earle and Holley, Washington Square, New York, N. Y.

One advantage of staying at either one of these hotels is that they have transportation facilities from the hotel to the pier, and are also convenient to Fifth Avenue buses.

Thos. Cook & Son advises that all the members should reach New York at least one day in advance of sailing as there may be some final instructions. Up to date, ninety-six have booked on the S.S. *Caronia* sailing on July 8, and seven on the S.S. *Drottningholm* sailing on July 9. A good many nurses are sailing in June and the probable attendance of American nurses at the Congress will be approximately 150.

THE ROYAL BRITISH NURSES' ASSOCIATION'S CLUB

Nurses from America who contemplate visiting England on their way to and from the International Conference at Helsingfors should get into communication with the Secretary of the Royal British Nurses' Club at 194 Queen's Gate, London, S. W. 7. There they will find exceedingly comfortable quarters and excellent meals.

The Club is situated in one of the finest streets in London and is only two minutes walk from Kensington Gardens, which, with Hyde Park adjoining, form perhaps the most beautiful of London's famous parks; close to the Club is situated the famous Royal Palace of Kensington, several museums and other places of interest. At the Club there congregate members of the nursing profession from all parts of the world and there British nurses delight in welcoming their American Nurses to their beautiful Club and in helping them in every possible way to arrange expeditions to places of interest in England. The

Committee of the Association have decided to allow overseas nurses who visit London this year to stay at the Club on the same terms as Members. The charges vary from two to three guineas weekly and full particulars can be obtained by writing to the Secretary at 194 Queen's Gate, London, S. W. 7.

NURSES' RELIEF FUND

REPORT FOR APRIL, 1925

Balance on hand, March 30, 1925	\$14,491.93
Interest on bonds	383.37
Interest on bank balance	12.74

Receipts

California: Dist. 1, \$32; Dist. 8, \$30; Dist. 9, \$5; Dist. 13, \$1----	68.00
Colorado: Colorado Training School Alumnae Assn., Denver--	50.00
Maryland: State Relief Fund Committee, \$5; two individuals, \$6 -----	11.00
Massachusetts: Middlesex County Branch -----	20.00
Michigan: Dist. 2, \$39; Dist. 4, \$3; Dist. 11, Farrand Alumnae Assn., \$37; St. Mary's Alumnae Assn., \$25; Women's Hosp. Alumnae Assn., \$25; individual member, \$1; Dist. 14, \$60; Kalamazoo Dist., \$3-----	193.00
Missouri: Noyes Hosp. Alumnae Assn. (in honor of Florence Nightingale's birthday), \$25; Lutheran Hosp. Alum. Assn., St. Louis, \$40-----	65.00
New Hampshire: New Hampshire State Hospital Alum. Assn-----	25.00
New Jersey: Dist. 2, \$1; Dist. 6, \$16 -----	17.00
New York: Dist. 1, Buffalo General Hosp. Alumnae Assn., \$25; Dist. 4, Hospital of Good Shepherd, Alumnae Assn., Syracuse, \$222; Dist. 6, Watertown City Hosp. Alumnae Assn., \$50; collection at District meeting, \$9; individual members, \$3; Dist. 13, St. John's Riverside Hosp. Cochran Training School Alumnae Assn., \$31; two individuals, \$12	352.00

Ohio: Dist. 1, \$6; Dist. 2, \$16
Dist. 4, St. Luke's Hosp., \$20;
Cleveland City Hosp., \$25; Fair-
view Park Hosp., \$10; Luckirn
Hosp., \$10; Charity Hosp., \$25;
Mt. Sinai Hosp., \$25; Huron
Road Hosp., \$25; Lakeside
Hosp., \$100; Dist. 5, \$25; Dist.
9, \$50; St. Vincent's Hosp., \$25;
Robinwood Hosp., \$25; Flower
Hosp., \$10; Dist. 10, \$58; Dist.
13, \$21-----

476.00

Oregon: State Graduate Nurses'
Assn. -----

105.00

Pennsylvania — State Graduate
Nurses' Association. The follow-
ing Alumnae Associations con-
tributing 100 per cent.: Dist-
rict Association 1—Children's
Homeopathic Hosp., Philadel-
phia, Joseph Price Hosp., Phila-
delphia, Mt. Sinai Hosp., Phila-
delphia, Philadelphia General
Hosp., Philadelphia, Pennsylv-
ania Hosp., Philadelphia, Penn-
sylvania Hosp. for Mental and
Nervous Diseases, Philadelphia,
Protestant Episcopal Hosp.,
Philadelphia, Samaritan Hosp.,
Philadelphia, Stetson Hosp.,
Philadelphia, Woman's Hosp.,
Philadelphia, Hahnemann Hosp.,
Philadelphia; Dist. Assn. 2—Ed-
ward Harvey Memorial College
for Nurses, Allentown, Easton
Hosp., Easton, Reading Hosp.,
Reading, St. Luke's Hosp., Beth-
lehem; Dist. Assn. 3—City
Hosp., Wilkesbarre, Danville
State Hosp., Geisinger Memorial
Hosp., Danville, Hahnemann
Hosp., Scranton; Hazelton State
Hosp., Hazleton, Mercy Hosp.,
Moses Taylor Hosp., Scranton,
Mid Valley Hosp., Peckville,
Nanticoke Hosp., Nanticoke,
Nesbit Hosp., Westside, Pittston
Hosp., Pittston, Robert Packer
Hosp., Sayre, State Hosp., Scrant-
on, Taylor Hosp., Taylor, West
Side Hosp., Scranton, Wyoming
Valley Homeopathic Hosp.,
Mercy Hosp., Wilkesbarre; Dist.

Assn. 4—Harrisburg Hosp.,
Harrisburg, York Hosp., York,
Chambersburg Hosp., Chambers-
burg, Carlisle Hosp., Carlisle,
Williamsport Hosp., Williams-
port; Dist. Assn. 5—J. C. Blair
Memorial Hosp., Huntington,
Lock Haven Hosp., Lock Haven,
Clearfield Hosp., Clearfield,
Mercy Hosp., Conemaugh Valley
Memorial Hosp., Johnstown,
Mercy Hosp., Altoona; Dist.
Assn. 6—Allegheny General
Hosp., Pittsburgh, Butler Coun-
ty Hosp., Butler, Children's
Hosp., Columbia Hosp., Pitts-
burgh, Citizen's General Hosp.,
New Kensington, Latrobe Hosp.,
Latrobe, McKeesport Hosp.,
McKeesport, Ohio Valley, Mc-
Kees Rocks, Passavant Hosp.,
Pittsburgh, Pittsburgh City
Home and Hosp., Bridgeville,
Providence Hosp., Rochester
General Hosp., Rochester, Se-
wickley Valley Hosp., Sewickley,
Chenango Valley Hosp., New
Castle, St. John's General Hosp.,
Pittsburgh, Uniontown Hosp.,
Uniontown, Washington Hosp.,
Washington, Westmoreland Hosp.,
Greensburg, Western Pennsylv-
ania Hosp., Pittsburgh; Dist. 7,
Hamot Hosp., Erie, Warren State
Hosp., Warren, Spencer Hosp.,
Mercer Hosp., Mercer-----

4,100.00

Texas: Dist. 2, ----- 12.00

Wisconsin: Dist. 1, \$25; Dist. 2,
six individuals, \$6; Dists. 4 and
5, \$30; Dist. 11, \$11; Dist. 12,
\$11; Columbia Hosp. Alumnae
Assn., Milwaukee, \$25-----

108.00

Total receipts ----- \$20,490.04

Disbursements

Paid to 66 applicants... \$1,035.00
Office supplies ----- 14.80
Rental of safe deposit
box ----- 15.00
Exchange on checks.... .60
Interest received on
bank balance of

American Nurses' Relief Fund Savings Account transferred to that account ----- 12.74

Total disbursements 1,078.14

Balance on hand, April 30, 1925.. \$19,411.90
Balance in American Nurses' Association Nurses' Relief Fund Savings Account ----- 5,012.74
Invested Funds ----- 83,531.14
\$107,955.78

All contributions to the Nurses' Relief Fund should be made payable to the Nurses' Relief Fund and sent to the State Chairman. She, in turn, will mail the checks to the American Nurses' Association, 370 Seventh Avenue, New York, N. Y. Requests for leaflets should be sent to the Director at the same address. For application blanks for beneficiaries, and other information, address Elizabeth E. Golding, Chairman, 317 West 45th Street, New York, N. Y.

THE ISABEL HAMPTON ROBB MEMORIAL FUND

REPORT TO MAY 9, 1925

Previously acknowledged ----- \$29,474.84
Kansas: State Nurses' Association 25.00
Maryland: Johns Hopkins Alum. Assn. ----- 25.00
Massachusetts: Melrose Hosp. Alumnae Assn., \$5; Middlesex County Assn., \$20; Newton Hosp. Alumnae, \$25; St. Elizabeth's Alumnae Assn., Boston, \$5 ----- 55.00
New Jersey: State Nurses' Assn. 25.00
Oregon: State Graduate Nurses' Association ----- 67.00
Tennessee: Registered Nurses' Assn., Nashville Dist. ----- 10.00
Washington: District 2 ----- 5.00
Wisconsin: State Nurses' Assn. ----- 25.00
\$29,711.84

Nineteen applications for scholarships for the year 1925-26 had been received when the lists were closed on May 1. The four who stood highest on the list of candidates and

who have won the scholarships are: Jean Balfour, Maryland; Wilkie Hughes, Indiana; Henrietta Froehle, Wisconsin; Minnie A. Schultz, Minnesota.

THE McISAAC LOAN FUND

REPORT TO MAY 9, 1925

Balance, April 10, 1925 ----- \$340.84
Kansas: State Nurses' Assn. ----- 50.00
Massachusetts: Middlesex County Assn., \$20; St. Elizabeth's Alumnae Assn., Boston, \$5 ----- 25.00
Washington: Dist. 2 ----- 5.00
Wisconsin: State Nurses' Assn. ----- 25.00
\$445.84

Contributions to these two funds are solicited from nursing organizations and from individuals. Checks should be made payable to Mary M. Riddle, Treasurer, and sent to her, care *American Journal of Nursing*, 19 West Main Street, Rochester, N. Y.

DELANO MEMORIAL REPORT

A meeting was held with Colonel Sherrill, Chief of the Bureau of Buildings and Grounds, in regard to the placing of the Delano Memorial in the public park opposite the Red Cross building. Colonel Sherrill expressed himself as most interested in the Memorial, he has approved it entirely, but he was doubtful about the particular place. He was also very much pleased with the drawing for the proposed Memorial and said that he saw no reason why it could not be placed on public property and that he would look over the ground and see where he thought it would best fit into the plans of the Park Commission. There were present at this meeting General Ireland, Clara D. Noyes and Lucy Minnigerode.

It is impossible to put the bill into Congress prior to December 1, when Congress reconvenes, and it is hoped that the business with the Fine Arts Commission and Colonel Sherrill's office may be completed so that the bill can be promptly introduced when Congress meets.

The fund at present stands something over \$37,000. Mrs. Whitney has presented two contracts,—one calling for \$37,000 and one for \$50,000. Naturally the \$50,000 contract

provides the more elaborate and the more complete Memorial. The main features of it are the same in both. The finer points are eliminated for the cheaper contract. The Committee does not feel that it should go before the nurses of the country again and ask for the completion of the original \$50,000, which it planned to secure, and the Chairman would like an expression of opinion from the nurses as to whether we should make the effort to secure this additional \$15,000 or whether we should accept the less expensive Memorial. \$35,000 of this fund is invested and is bringing in a small income, which is added to the fund, but that is a slow process toward securing the full amount.

LUCY MINNIGERODE,
Chairman.

NEW ENGLAND DIVISION MEETING

The New England Division of the American Nurses' Association will hold the 1925 Convention in Boston, June 3-4-5, with Headquarters at The New England Women's Club, 585 Boylston Street, Boston, Mass. The hotels within walking distance of headquarters are: The Brunswick, Copley Square, Copley Plaza, Lenox Vendome, Victoria and the Westminster. The Chairman of the Arrangements Committee is Miss Carrie M. Hall, Superintendent of Nurses, Peter Bent Brigham Hospital, Boston, Mass.

THE MIDDLE ATLANTIC DIVISION

The Board of Directors of the Middle Atlantic Division of the American Nurses' Association which includes the States of Delaware, District of Columbia, Maryland, New Jersey, New York, and Pennsylvania, held a meeting in Philadelphia on April 18. All States were represented and twenty-six out of thirty members were present, so that the Middle Atlantic Division was definitely launched.

The following officers were elected: President, Mrs. Anne L. Hansen, Buffalo, N. Y.; vice president, Harriet Frost, Philadelphia, Pa.; secretary, Annie Crighton, University Hospital, Baltimore, Md.; treasurer, Martha Moore, Maplewood, N. J.

An informal Constitution and By-laws was adopted. The first general meeting is to be held in Washington, D. C., December 3 and 4, 1925.

AN AMERICAN HEALTH CONGRESS

In order to give health workers from every part of the country a bird's-eye view of the public health movement in its broadest aspects, the National Health Council at 370 Seventh Avenue, New York City, has planned for an American Health Congress to be held at Atlantic City during the week of May 17, 1926.

The leading authorities on each phase of the public health movement, such as tuberculosis, cancer, heart disease, blindness, social and mental hygiene, public health nursing, preventable diseases, and positive health education for both children and adults, will present the latest and most authoritative findings and programs for the solution of these problems.

Among the groups that will cooperate in the Congress are the following members of the National Health Council: American Child Health Association, American Heart Association, American Public Health Association, American Red Cross, American Social Hygiene Association, American Society for the Control of Cancer, Conference of State and Provincial Health Authorities of North America, National Committee for Mental Hygiene, National Committee for the Prevention of Blindness, National Organization for Public Health Nursing, National Tuberculosis Association, United States Children's Bureau, United States Public Health Service, Women's Foundation for Health.

In addition to these groups, it is anticipated that leading health associations of Canada, Mexico and elsewhere will cooperate in this Congress. The American Nurses' Association, the National Organization for Public Health Nursing and the National League of Nursing Education will hold their regular biennial meeting during this same week at Atlantic City. The General Federation of Women's Clubs will meet directly after the Congress.

Already well organized plans are under way. The Atlantic City Convention authorities and the hotels will cooperate to the fullest extent. The Steel Pier has been engaged for headquarters and meetings will be held there and at the near-by hotels on the boardwalk. Part of the space on the Steel Pier will be used for commercial and educational exhibits. A strict censorship will be exercised, however, in order that the exhibits may conform with the high standards of such a meeting.

ARMY NURSE CORPS

During the month of April, 1925, the following named members of the Army Nurse Corps were transferred to the stations indicated: To Station Hospital, Fort Bragg, N. C., 2nd Lieuts. Kathryn M. Greene, Harriett P. Hankins, Sarah E. Holden, Adalissa Mattson; to Station Hospital, Fort Monroe, Va., 2nd Lieut. Emily H. M. Weder; to Station Hospital, Fort Riley, Kans., 2nd Lieut. Dorothy L. Catlin; to Walter Reed General Hospital, Washington, D. C., 2nd Lieuts. Mary L. Applewhite, Jennie E. Barrett, Elizabeth M. Beedles, Agnes Gilmour.

Eleven nurses have been admitted to the Corps and assigned to stations.

The following named, previously reported separated from the service, have been reassigned: 2nd Lieuts. Lulu G. Hatfield, Josephine Brown, Fitzsimons General Hospital, Denver, Colo.; 2nd Lieut. Edna M. Smiley, Letterman General Hospital, San Francisco, Cal.; 2nd Lieut. Jane M. Gallagher, Walter Reed General Hospital, Washington, D. C.

Orders have been issued for the separation from the service of the following named: Sibyl Ackley, Ada V. Gambill, Maymie L. Harper, Marie M. Hegner, Ima L. Juni, Inez Logan, Pauline McNamara, Grace M. Nestle, Catherine H. A. Phelan, Louise K. Sessler, Metta May Stady, Edna C. Stacy, O. Philomena Supper, Esther Van Scoyk and Elsie B. Yarbrough.

First Lieut. Julia O. Flikke and First Lieut. Maude Davison, of the Walter Reed General Hospital, have been ordered to New York for temporary duty to take the Summer course at Teachers College in the Department of Nursing and Health. First Lieut. Ruth Taylor has just completed a nine months period of detached duty in New York taking the course in Public Health Nursing at Teachers College. First Lieut. Frances M. Steele has returned from the Philippine Islands via India, Egypt and Europe.

ARMY SCHOOL OF NURSING

Forty-one student nurses, comprising the class of 1925, will graduate from the Army School of Nursing on June 5. The annual meeting of the Alumnae Association of the Army School will be held at the Walter Reed

General Hospital in connection with the graduating exercises.

JULIA C. STIMSON,

Major, Supt., Army Nurse Corps, Dean, Army School of Nursing.

NAVY NURSE CORPS

During the month of April, 1925, two nurses were appointed and assigned to duty at Naval hospitals:

Transfers: To Annapolis, Md., Anna P. Smith; to Chebea, Mass., Julia Lennon; to Newport, R. I., Ethel J. MacCormack, Anna W. Gray; to Norfolk, Va., Jean Bowman, Susan J. English; to Pearl Harbor, T. H., Sarah I. Hart, Mary C. McNelis, Louise E. LeClair; to Portsmouth, Va., Navy Yard Dispensary, Ida L. Hodge; to Portsmouth, N. H., Thomasina Libbey; to Puget Sound, Wash., Agnes G. Gibson; to San Diego, Calif., Marian Simmons, Mary L. Roberts; to St. Thomas, V. I., Gertrude L. Campbell, Lulu Lloyd; to Washington, D. C., Sarah Almond, Minnie D. Stith; to Washington D. C. Dispensary, Navy Yard, Ruth M. Anderson.

Honorable Discharge: Isabella C. Manning, Eleanor B. O'Grady.

Resignations: Elizabeth E. Connors, Eunice Culver, Yola Culver, Edith Pollock.

J. BEATRICE BOWMAN,

Superintendent, Navy Nurse Corps.

U. S. PUBLIC HEALTH SERVICE

The following transfers, reinstatements and new assignments have been made in the U. S. Public Health Service during the month of April, 1925:

Transfers: Dorothy Dunn, Chief Nurse, to St. Louis, Mo.; Eva Knight, Chief Nurse, to Buffalo, N. Y.; Julia Doyle to Ellis Island, N. Y.; S. Adelaide Montague to Baltimore, Md.; Mary Parker to New Orleans, La.; Ellen Rasmussen to Savannah, Ga.

Reinstatements: Rosalie P. Manwiller to Stapleton, N. Y.; Anna Parker to New York City; Mary E. Russell to San Francisco, Calif.; Ethel L. Ratliff to Louisville, Ky.

New Assignments: Nine.

LUCY MINNIGERODE,

Superintendent of Nurses, U.S.P.H.S.

UNITED STATES VETERANS BUREAU
NURSING SERVICE

Assignments for the month of April in the Hospital Service, 70; in the District Medical Service, none.

Reinstatements: Mary A. Herring, Margaret G. Kelley, Ivy L. Pugh, Olive K. Grimsrud, Ethel E. Dickens, Mrs. Clara K. Jones, Hanna L. Bennett, Hazel Decker, Lela Baggerly, Rose Mary Eythe and Gertrude C. Duchez.

Transfers: To Walla Walla, Wash., Ethel R. Jardella, Edith C. Baldwin; to Whipple, Ariz., Mary L. Bowler; to Camp Kearney, Calif., Drucilla Gubbins; to Fort Lyon, Colo., Marcella Neiman, Hattie E. Biddle, Laura M. Larson; to Newark, N. J. Regional Office, Elsie B. Hixson; to Livermore, Calif., Gertrude Vail, Edytha Macy, Gertrude Patterson, Celia Miller, Cora M. Hoyne, Carolyn P. Traver; to Oteen, N. C., Mrs. Alice L. Hill, Laura M. Nell, Marguerite L. Binley; to Portland, Ore., May McKennie, Lena M. Carlson; to Northampton, Mass., Mary E. O. Driscoll, Leora M. Branigan; to Bronx N. Y., Winifred Blake; to Tacoma, Wash., Mary G. Moore; to American Lake, Wash., Mary Callicotte; to Perry Pt., Md., Laura Hazelwood, Elizabeth M. Curtis; to Lake City, Fla., Karen M. Quevillion; to Ft. Thomas, Ky., Jean L. Wilkinson.

MARY A. HICKEY,
Superintendent of Nurses.

THE AMERICAN ASSOCIATION OF HOSPITAL NURSE WORKERS will hold its annual meeting in Denver, Colo., on June 8-16, at the Shieley-Savoy Hotel. Some of the topics on the program are: Follow Up, Mary H. Combs, Brooklyn Hospital, Brooklyn, N. Y. Some Social Deductions from Medical Diagnoses, Helen Beckley, Michael Reese Hospital, Chicago, Ill. How Hospital and Community Workers Can Best Meet Their Mutual Problems, Ida M. Cannon, Massachusetts General Hospital, Boston, Mass.

In the Section on Psychiatric Social Work, a round table on Problems of Therapeutic Relief, will be led by Deborah Barus, Union Hospital, Fall River, Mass. Other round tables are: The Use of Boarding Homes as a Part of Treatment in Psychiatric Work, leader, Mary L. Whitehead, Chicago, Ill.; The Co-

operative Work of a Child Guidance Clinic with Other Welfare Agencies, leader, Hester B. Crutcher, Minneapolis, Minn.; The Functions of Hospital Social Service Committees, Mrs. John E. Jennings, Brooklyn Hospital, Brooklyn, N. Y.; Content of Instruction in Medical Social Work for Student Nurses, Mabel R. Wilson, Children's Hospital, Boston, Mass. Mrs. Faul-Smith, Bellevue Hospital, New York, will speak on The Organization and Social Work of an Evening Cardiac Clinic.

ANNUAL HEALTH EDUCATION
CONFERENCE

At the invitation of the University of Chicago, the fourth annual working conference in health education is to be held, June 22 to 26 inclusive at Chicago. This conference is called by the Health Education Division of the American Child Health Association and will be limited to 150 participants. The conference discussion will center around The Training of Teachers for Health Education.

CATHOLIC GUILD OF NURSES

THE INTERNATIONAL CATHOLIC GUILD OF NURSES will hold its second annual retreat and conference at Spring Bank, Okauchee, Wis. The retreat which began on May 31 continues until June 3. The Conference lasts from June 4 to 6. June 4 will be devoted to business sessions. June 5 has for its program papers and addresses: Opportunities in Nursing Education, Evelyn Wood, Chicago, Opportunities of the Nurse as an Instructor, Sister Domitilla, Rochester, Minn.; The Nurse's Opportunities in Higher Education, Major E. A. Fitzpatrick, Milwaukee, Wis.; Opportunities of the Nurse as a Social Worker, Francis P. LeBuffe, New York City; Opportunities of the Navy Nurse, J. Beatrice Bowman, Washington, D. C.; Opportunities of the Industrial Nurse, Mabel Boyd, Chicago; Postgraduate Courses and Scholarships, M. Blanche Atkinson, Minneapolis; The Nurse among the Deaf and Dumb, Rev. Stephen Klopfer, St. Francis, Wis.; Opportunities of the Dental Nurse, M. N. Federspiel, Milwaukee, Wis. Papers for June 6 are: Nursing Opportunities, Anna C. Jamme, California; Opportunities of the Army Nurse, Major Julia Stimson, Washington, D. C.; Spiritual Opportunities of the Catholic Nurse, Rev. John P.

Boland, Buffalo, N. Y.; Opportunities in Psychiatric Nursing, Rose Bigler, Peoria, Ill.; Opportunities of the Nurse as a Bacteriologist, Margaret Flynn, Chicago.

Canada: Montreal.—The new School of Public Health Nursing of the University of Montreal was formally inaugurated on March 26. Dr. Lee K. Frankel of the Metropolitan Life Insurance Company, the Rector of the University, and Edith B. Hurley, the new professor of public health nursing, were the speakers. Miss Hurley, who is the first woman to hold a position in the University, (which is the educational center of the French-speaking people of Canada) gave her address in both French and English. The teaching center occupies two floors of a fine new brick building which is a sort of working men's club. On the first floor there is ample space for Mothers' Clubs, etc., and by the use of attractive partitions three other good-sized rooms are available for special clinics and consultations. On the second floor are the offices and a large class-room. There is everything to work with and an abundance of good-will, so the purpose for which the *Ecole d'Hygiene Sociale Applique* was established should make an outstanding success in public health work. For those who are doing the actual work, the joy of it is that they are pioneers blazing a new trail leading to longer, better and happier lives for the French Canadians.

England: London.—The College of Nursing, with its members throughout the country, warmly welcomes all Nurses whose attendance at the International Council of Nurses' Conference at Helsingfors, Finland, will bring them to England, and it is hoped they will visit the Headquarters of the College at No. 7 Henrietta Street, Cavendish Square, W. 1, when they are in London. The College offers the following hospitality and opportunities: Temporary membership of the Cowdray Club, 20 Cavendish Square, W. 1, in accordance with the Rules of the Club. List of the Hospitals willing to allow facilities for observing work in the wards, etc. List of District Nursing Associations willing to receive the Nurses as guests in order to see something of the rural and district work. List of Midwives who will be glad to show their work. List of Training Schools willing to give opportunities

of showing the training of the Probationers in theoretical work. The Public Health Section will arrange for hospitality in any part of England to nurses interested in Public Health Administration. The College Library will be open to visiting Nurses. Local Centers will be willing to receive Nurses as guests at their meetings. The College will arrange At Homes during the time that the nurses are in England, so that College members will have the opportunity of welcoming them. A list of rooms to let and the names of hostesses in or near London will be sent on application.

Korea: THE GRADUATE NURSES' ASSOCIATION OF KOREA held its annual meeting March 12 and 13 at the Seoul Foreign Nurses' Home, Severance Hospital. Ten foreign and twenty Korean nurses were present. Miss E. Shepping of Kwangju, President, presided at all the sessions. Several new members were accepted. Excellent lectures on New Treatments in Internal Medicine by Dr. Byron Koo and Private and Public Hygiene by Dr. Yu were enjoyed by all. The following subjects were discussed: Teaching from the pupil's point of view; social service in the city of Seoul; treatment of noma; the future of nursing in Korea. The officers for 1925 and '26 are as follows: President, Miss E. Shepping, Kwangju; vice-president, Him Pok Sin, Seoul; secretary, Han Sin Kwan, Seoul; treasurer, Kin Sun Kung and Lee Yang Suk, Seoul.

STATE ASSOCIATIONS

California: Los Angeles.—THE ANGELUS HOSPITAL held graduating exercises for a class of 19, at the Ebell Club House, on May 11. The speaker was Judge Benjamin F. Bledsoe. Dancing followed the services. **San Francisco.**—THE FAR WESTERN EXTENSION OFFICE of the AMERICAN CHILD HEALTH ASSOCIATION was closed in May. Elnora E. Thomson who had directed the work has accepted the position of Director of Nursing for the Marion County Child Health Demonstration (Oregon) and will also be Director for Public Health Nursing in the Portland School of Social Work of the University of Oregon. The commencement exercises of the STANFORD SCHOOL OF NURSING, began on May 6, when the student nurses of the class of 1928, who were about to complete their four months Preliminary Course, presented an original play,

Episodes in First East (a demonstration of ward procedures), after which they were formally accepted into the school. The Senior dance to the class of 1925 was given on May 9; the Alumnae dinner on May 13; and on May 14 commencement exercises were held for a class of forty. Dr. Aurelia Henry Rinehardt, president of Mills College, addressed the class. Diplomas and pins were presented by Dr. George B. Somers and Maude Landis.

Colorado: Colorado Springs.—THE COLORADO SPRINGS NURSES' ASSOCIATION held its annual meeting on April 1, at the Y.W.C.A. The following officers were elected: President, Emma F. Miller; vice president, Pearl Drum-meller; recording secretary, Hazel D. Long; corresponding secretary, Catherine M. Ellis; treasurer, Agnes Musilek. Tea was served and a social hour followed.

Connecticut: New Haven.—THE CONNECTICUT TRAINING SCHOOL FOR NURSES OF THE NEW HAVEN HOSPITAL, held graduating exercises at Sprague Memorial Hall, for a class of 14, May 20. **Williamantic.**—ST. JOSEPH'S HOSPITAL held graduation exercises of the Training School on Hospital Day, May 12, at the Town Hall, for a class of eight. The address was given by Rev. George J. Donohue of Pomfret; the diplomas were conferred by F. E. Guild, M.D., who also presented the pins and prizes. A reception and dance followed the exercises.

District of Columbia: Washington.—THE DISTRICT OF COLUMBIA GRADUATE NURSES' ASSOCIATION held its annual meeting on May 4. The officers elected were: President, Gertrude Bowling; vice president, I. Malinde Havey; corresponding secretary, Mrs. Frances M. Elzey; recording secretary, Elizabeth Melby; treasurer, Katherine Douglass. The association has voted to become a part of the Middle Atlantic Division of the American Nurses' Association, which has recently been formed. The first meeting of the Division will be held in Washington, on December 3-4. **THE LEAGUE OF NURSING EDUCATION** held its April meeting at the U. S. Veterans Bureau Hospital, Mt. Alto. Dr. D. Percy Hickling, alienist of the District of Columbia, Associate Professor of Psychiatry at Georgetown Medical School, and Professor of Medical Jurisprudence at the National Law School, spoke on Medico-Legal Problems as

They Relate to the Nurse in Training, the Nurse in Private Duty and in Institutions. Active discussion followed. After the business meeting, during which the delegate to the meeting in Philadelphia of the Mid-Atlantic Division of the American Nurses' Association made a brief report, a social hour followed. At the annual meeting of the GARFIELD MEMORIAL HOSPITAL ALUMNAE, held recently, it was unanimously voted to increase the dues from \$6 to \$10, per capita, for the specific purpose of increasing the individual sick benefit dues and also to include \$1 from each member of the alumnae for the Relief Fund of the A. N. A. This will make an appreciable increase from the District of Columbia to the Relief Fund. This action on the part of the alumnae is the direct outcome of the report brought back from the convention held in Detroit last June.

Georgia: Atlanta.—THE GRADY HOSPITAL TRAINING SCHOOL held graduating exercises for a class of fifteen, on May 12, in the auditorium of the Nurses' Home. **Augusta.**—THE UNIVERSITY HOSPITAL held graduating exercises for a class of 17, on May 5. The address was given by Rev. J. A. Schaad; the diplomas were presented by Dr. W. H. Goodrich, Dean of the Medical Department of the University of Georgia.

Idaho: THE IDAHO STATE ASSOCIATION OF GRADUATE NURSES met at the Owyhee Hotel, Boise, May 2, with members from the senior classes of St. Alphonsus' and St. Luke's Hospitals as guests. An interesting and instructive talk on Diabetes Mellitus was given by Dr. Ernest Laubaugh. The business meeting followed, after which tea was served. The following officers were elected for the ensuing year: President, Beatrice Reichert, Boise; vice presidents, Florence Anderson and Urania Sturdevant; secretary, Barbara Williams, St. Luke's Hospital, Boise; treasurer, Johanna Caseberg.

Illinois: Chicago.—The regular meeting of the ILLINOIS LEAGUE OF NURSING EDUCATION was held on April 29, at the Chicago Nurses' Club. Edward A. Fitzpatrick, Ph.D., Dean of the Graduate School, Marquette University, Milwaukee, gave a most interesting and helpful talk on the Project Method of Teaching. Laura R. Logan, Illinois Training School for Nurses, spoke of the course

being sponsored by the Illinois League at the University of Chicago, during the Summer Quarter. Several alumnae associations were reported as having offered scholarships for this course to the members of their organizations. Students representing Schools of Nursing in the Central Council for Nursing Education presented a program for the Girls' Week Federation, in Fullerton Hall, Art Institute on April 21. THE ILLINOIS TRAINING SCHOOL FOR NURSES held graduating exercises for a class of forty-two on May 19 at the University Church of Disciples of Christ, the address being given by Horace Bridges. A dinner for the members of the class and their friends followed the exercises and in the evening, a reception and dance. Other events of commencement week were: on May 15, a luncheon with Mrs. Henry Faurot; on May 16, Class Day exercises in the roof garden; on May 17, Baccalaureate service with a sermon by Edward Scribner Ames; on May 18, a yachting party, the class of 1926 being hostesses; on May 20, a dinner given by the Alumnae Association at the Drake Hotel. THE PRESBYTERIAN HOSPITAL SCHOOL OF NURSING, held graduating exercises for a class of 87, on May 21, at The Sprague Home. The address was given by Rev. Henry Seymour Brown, D.D., diplomas were presented by Frank S. Shaw, President, and the pins by Mrs. Perkins B. Bass, President of the Woman's Auxiliary Board. THE RAVENSWOOD HOSPITAL SCHOOL FOR NURSES, held graduating exercises for a class of six, at Chase Park Community House, on May 6. ST. JOSEPH'S HOSPITAL SCHOOL FOR NURSES devoted May 7 to the fourteen nurses who completed their course. During the noon dinner in the new dining room, class prophecy, history and will were read. In the afternoon, exercises for the class of fourteen members were held in the Chapel, where Magr. J. B. Shells gave the address and music was enjoyed. A reception followed in the new nurses' home. PEORIA.—THE SEVENTH DISTRICT ASSOCIATION held a meeting on April 2, at St. Francis Hospital. An interesting report of the meeting held at Champaign, was given by Rose Wood, chairman of the Private Duty Section. Miss McKay, of the Public Health Nursing Association, and Belva Sturms of Peoria County Tuberculosis Association, who are members of the Building Committee,

gave an interesting report of a meeting held by the committee in Chicago, in regard to the Tuberculosis Cottage to be built at Naperville. The Seventh District wishes to go on record as heartily endorsing this cottage. After the business meeting a very interesting talk was given by Evelyn Wood of Chicago, chairman of the State League of Nursing Education, who has been on a down-state lecturing tour. The interesting program arranged by the St. Francis Alumnae Association was omitted, owing to the death of two Franciscan Sisters. After the meeting adjourned a social hour was enjoyed by a large attendance.

INDIANA: Ft. Wayne.—THE FIRST DISTRICT ASSOCIATION held its regular meeting May 9, at the Wayne Pharmacal Auditorium with the Lutheran Hospital Alumnae as hostesses. Professor Paul Beute, of Concordia College, gave an interesting talk on "To Live His Own Life", followed by a short musical program, there were fifty-six nurses present. The next meeting will be held September 12. INDIANAPOLIS.—ST. VINCENT'S HOSPITAL SCHOOL OF NURSING, held graduating exercises for a class of 33 on May 19, at Knights of Columbus Auditorium. A reception and dance followed the exercises. RICHMOND.—RIED MEMORIAL HOSPITAL held graduating exercises for a class of five, on May 15, at St. Paul's Parish House. The Alumnae Association gave a banquet to the graduating class on May 19.

IOWA: Council Bluffs.—THE JENNIE EDMUNDSON MEMORIAL HOSPITAL SCHOOL OF NURSING, held graduating exercises for a class of eleven, on May 12, at the First Congregational Church. Rev. Paul Calhoun of the First Presbyterian Church, gave the address. A reception in the church parlors followed the exercises. The Senior nurses of the school entertained fifty guests, including members of the hospital staff and their wives and friends at the annual class day held in the Nurses' Home. Pamela Kellog, a graduate of the school, has accepted the position of Night Supervisor of the Greater Community Hospital, Creston, Ia. Edith Schlotfeldt, is Night Supervisor of Dixon Hospital, Dixon, Ill.

KENTUCKY: THE KENTUCKY STATE ASSOCIATION OF REGISTERED NURSES will hold its nineteenth annual convention at the Phoenix Hotel, Lexington, June 10-12.

Maine: Lewiston.—THE CENTRAL DISTRICT has as officers: President, Una V. Clark, Augusta; secretary, Aurora Michaud, Lewiston; treasurer, Margaret Pearson, Lewiston.

Massachusetts: Boston.—THE BOARD OF REGISTRATION OF NURSES will hold an examination for applicants for registration June 11 and 12. Time and place will be designated on admission cards issued on the filing of applications. Applications for any examination must be filed at least seven days before the examination date. Each applicant must be present both days until dismissed. Charles E. Prior, secretary. THE MASSACHUSETTS HOMEOPATHIC HOSPITAL held graduating exercises for a class of 33, on April 2, at the Evans Memorial. The address was delivered by the Dean of Boston University, Dr. Arthur H. Wilde, who referred to the degree course recently established for students of the school to be known as Bachelor of Science in Education. The diplomas were presented by William F. Whittmore and the pins by Mrs. Thomas Bailey Aldrich. Dr. Horace Packard presented the class prize to Dena B. Dunlap. A reception followed at Vose Hall. Fall River.—THE NURSES' ALUMNAE ASSOCIATION OF THE UNION HOSPITAL, gave its annual banquet to the class of 1925, on April 16, at Hotel Mellen, with sixty-eight nurses present. Following the dinner the Alma Mater was sung by the Alumnae, after which a concert was given by the graduating class. Dancing was also enjoyed.

Michigan: THE MICHIGAN STATE NURSES' ASSOCIATION will hold its annual meeting from June 24 to 26, inclusive, in Traverse City. A splendid program is promised. Nettie Lou Kennedy, of the Traverse City State Hospital, is Chairman of the Arrangements Committee. Delegates attending, will please notify her, so that she may make plans for accommodation. Bishop Warren L. Rogers, recently consecrated Bishop Coadjutor of Ohio, previously Dean of St. Paul's Cathedral, Detroit, Michigan, delivered his farewell sermon to seven hundred Student and Graduate Nurses, who attended the Cathedral in uniform—representing twenty-seven different Hospitals of Detroit and vicinity—and Nursing Organizations. The service was held under the auspices of the Detroit branch of the Guild of St. Barnabas for Nurses. During the service

the Bishop was presented with a gold medal—the gift of the Detroit Guild of St. Barnabas. **Battle Creek.**—THE BATTLE CREEK DISTRICT held a meeting at the Sheldon Memorial Hospital Nurses' Home, April 8. Seventy-five were present from the District. Mrs. Mary McDonald, superintendent, acted as hostess. Dr. W. W. Whitehouse, of the Albion College faculty, gave the address of the evening, speaking of Sociology and Psychology in Relation to Nursing. The rest of the evening program consisted of music and a one-act comedy, Joint Owners in Spain. After the business meeting refreshments were served. On June 10, there will be a picnic in Branch County with Ada Safford as hostess. Five minute speeches will be given by representative members. **Detroit.**—THE DETROIT HOSPITAL TRAINING SCHOOLS FOR NURSES, held their eighth annual community commencement, on May 14, at Arcadia Auditorium. The Harper Hospital Training School Committee, held a reception for the graduating class of the FAR-RAND TRAINING SCHOOL FOR NURSES, on May 14, at the Nurses' Home. There were 69 in the class.

Minnesota: At the quarterly meeting of the directors of the State Association, plans were made for the annual meeting of the Association in the fall. It was decided not to hold a special meeting in May. The National Tuberculosis Association will hold its annual convention in Minneapolis, during the week of June 15. As this will bring into the city experts in the field of tuberculosis, the Extension Department of the University of Minneapolis and the Hennepin County Tuberculosis Association will hold an institute June 15-19, for all nurses interested. Beside lectures, this will include demonstrations and field demonstrations in the bedside care of tuberculosis patients in the home, the school and the sanitarium. For further information write to Kathryn Radebaugh, Executive Secretary, Hennepin County Tuberculosis Association, 414 S. 8th Street, Minneapolis. **Duluth.**—ST. LUKE'S HOSPITAL NURSES' ALUMNAE ASSOCIATION, held a business meeting on May 4, with about thirty-five members present. After the business session an entertainment was enjoyed. Some outside entertainment is planned for each meeting. In previous years the training school has been

provided with health journals which were furnished by individuals; this year the Alumnae voted to subscribe for journals for the school.

Faribault.—THE ST. LUCAS HOSPITAL ALUMNAE ASSOCIATION held its annual meeting on March 3. The officers elected are: President, Sister Amelia Klopsteg; vice president, Bertha Hartleben; secretary, Florence Bisping; treasurer, Sister Emma Kroehler. Laura Schafer, who has been doing surgical work at the Deaconess Hospital, Lincoln, Ill., has accepted a position for night duty in Detroit. The Alumnae Association gave a carnival the latter part of April.

Minneapolis.—On the evening of March 26, the Business and Professional Women invited the nurses of the THIRD DISTRICT to a Dutch Treat dinner and party at the Business Woman's Club. The dinner was enlivened by songs led by enthusiastic leaders. Several club members gave short talks on club activities and future plans. During the evening the nurses put on some very clever and original skits, which gave evidence that there is an abundance of musical and dramatic talent in the nursing group. Several hundred people were present and the party was a most enjoyable affair. The March meeting of the District Association was held at St. Mary's Hospital, as guests of St. Mary's Alumnae. There was an unexpectedly large attendance of over a hundred. Clifford Skinner of the McPhil School of Music opened the program with songs and eight little girls from St. Stephen's School gave dances. Third District monthly meeting was held April 8, in the classroom of the Minneapolis General Hospital Nurses' Home. Practical demonstrations in nursing were presented by students of the Central School of Nursing. The demonstrations given were hot pack, shampoo in bed, tube feeding of infants and contagious technic. The fine technic exhibited in these procedures, reflects great credit on the training received by Central School students. The Private Duty Section held a meeting at the Curtis Hotel, April 28, to discuss revision of Registry Rules. Lydia Keller has accepted the position of Superintendent of the Methodist Hospital, Wadena, Minn. Gertrude Owen, Eitel Alumnae, is surgical nurse in Emigrant, Montana. Katherine Mears and Irma Burgess, Hill Crest Alumnae, have positions in the Deaconess Hospital,

Butte, Montana.

Rochester.—The regular monthly meeting of the SIXTH DISTRICT ASSOCIATION, was held in St. Mary's Hospital Nurses' Home, April 6. A Travelogue of Yellowstone National Park was given by Mrs. Hopkins. Miss English spoke of the convention of the National League and urged all to attend. A letter of resignation from Mrs. Wilson, who has been superintendent of Colonial Hospital for nine years, was read and accepted with regret. Mrs. Wilson will take up work in Butte, Mont., and will be missed by her many friends in Rochester. Twenty-four new members were admitted to the district.

St. Paul.—ST. JOSEPH'S HOSPITAL ALUMNAE ASSOCIATION sponsored a bridge party and dance, April 29, at The Knights of Columbus Hall, where about six hundred people were enjoyably entertained. Proceeds of this party amounting to \$790 will be used toward furnishing the gymnasium of the nurses' home which is soon to be erected by the hospital.

Mississippi: THE MISSISSIPPI STATE BOARD OF EXAMINERS OF NURSES will meet for examination and registration in Jackson, July 6 and 7. Ernestine Bryson Roberts, Secretary, Laurel, Miss. The State Meeting of the PUBLIC HEALTH NURSES of Mississippi was held in Jackson, April 27-29, at the City Auditorium. Every one of the speakers gave a most interesting delineation of his particular subject. Some of the unusual topics were, Care and Training of the Crippled Child, Care of the Blind, Training of the Deaf Mute, The Misunderstood Child, The Mentally Defective Child as a State Problem. All of the public health nurses of the state but three were present. The outstanding features of the conference were as follows: The interest and the participation of the nurses, the fact that the conference was run on schedule time and also that several nurses and interested physicians and lay members of the community attended. One of the interesting features of the round table discussion was the appointment of committees relative to membership in the National Organization for Public Health Nursing, and subscription to the *Public Health Nurse* by various training schools and nurses throughout the state. It was decided by the group of nurses that they study Parliamentary Law preliminary to organizing a state auxiliary to the National

Organization for Public Health Nurses this fall.

Nebraska: Omaha.—THE NEBRASKA METHODIST EPISCOPAL HOSPITAL held graduating exercises for a class of 22, at the First Methodist Church, May 22. The address was given by Bishop F. T. Keeney, the diplomas were presented by Ford E. Hovey.

New Jersey: Elizabeth.—ELIZABETH GENERAL HOSPITAL AND DISPENSARY SCHOOL OF NURSING held graduating exercises and celebrated its thirty-third anniversary on May 12, at the Central Baptist Church. A class of ten received diplomas which were presented by Frederic J. Faulks, President of the Board. The address was given by Florence M. Johnson; the pins were presented by Kate Madden. **Hackensack.**—THE HACKENSACK HOSPITAL SCHOOL OF NURSING graduated a class of thirteen on May 6. The class contributed a chorus, vocal solos, a Will, and a Prophecy to the program. The address was given by Mary M. Roberts, Editor of the *Journal*, and the Nightingale Pledge was administered by Mary Stone Conklin, for many years superintendent of the hospital. Money prizes were awarded Emily Travers and Charlotte Hall for excellence in theory and to Florence Foos and Dorothy Haring for excellence in practical nursing. The exercises were followed by dancing. On Sunday, May 3, Rev. J. C. Rauscher, of the Second Reformed Church, delivered a Baccalaureate sermon; on May 4, the Alumnae entertained the class at a theater in New York City and on May 5, with a card party and supper; on the afternoon of May 6, Miss Lord, Superintendent of Nurses, gave a tea and reception to the class and their friends, in the Nurses' Home. **Jersey City.**—The Senior Class of CHRIST HOSPITAL SCHOOL OF NURSING gave a very enjoyable and successful card medley on the evening of May 4. The proceeds, \$200, was given as an initial gift for new operating room equipment. The commencement exercises of the School of Nursing will be held at the Bergen Lyceum on June 11. **Orange.**—THE ORANGE MEMORIAL HOSPITAL SCHOOL OF NURSING held graduating exercises for a class of 27, on April 30, in the Woman's Club of the Oranges. There was a large attendance and the evening was most successful. The address was given by Rev. Archibald Black.

Diplomas and prizes were presented by Mrs. F. Westervelt Tooker, and the pins by Mrs. Frank B. Colton. **Passaic.**—The regular meeting of ST. MARY'S HOSPITAL ALUMNAE ASSOCIATION was held April 2, at which the following officers were elected: President, Margaret S. Wilson; vice president, Helen Purcell; secretary, Mrs. Lillian E. Horton; treasurer, Henrietta Harrison; Chairman of the Printing Committee, Mrs. E. B. Crozier; Credential Committee, Sister Mary Charlotte.

New Mexico: THE NEW MEXICO STATE NURSES' ASSOCIATION held its annual convention at St. Joseph Sanatorium, Albuquerque, April 25. The meeting was opened by an invocation by Rev. William Doyle. The address of welcome was given by Rev. Carl Amerding; the response by Mrs. L. L. Miner. Dr. B. F. Cook gave an address on The Giving of Insulin; and Dr. J. E. Harris spoke on The Care and Treatment of Tuberculous Patients. The President, Miss McMenamin, gave a report of the convention in Detroit of the American Nurses' Association. In the afternoon, papers were given on Tuberculosis of the Kidneys, Dr. W. H. Woolston; Surgery, Dr. P. G. Cornish; Hospital Management, Miss G. Frankenfeld; Private Duty, M. K. Kreuger. On Sunday the guests enjoyed a sightseeing trip. Officers elected are: President, Stella Chapin, Albuquerque; vice presidents, Sister Mary Austin, Santa Fe, and Thelma Tipton, Dawson; secretary, Minnie Krueger, Albuquerque; and treasurer, Sister Frances de Chantal.

New York: Albany.—At a meeting of the CAPITAL DISTRICT No. 9, the following officers were elected: President, Katharine Lamb, vice presidents, Mary McIlhenny, Florence Fields; secretary, Helen Murphy; treasurer, Catherine Corcoran. Directors, Florence Freeman, Sister Alice. **Brooklyn.**—At the annual meeting of the LONG ISLAND COLLEGE HOSPITAL ALUMNAE ASSOCIATION, the following officers were elected: President, Mary E. Beyer, vice presidents, Marion Harris, Katharine Scheidel recording secretary, Margaret Beidseel; corresponding secretary, Rhoda McKee; treasurer, Ruth Grobler. THE ALUMNAE ASSOCIATION OF THE CUMBERLAND STREET HOSPITAL held a special meeting in the auditorium of the new hospital on April 21. A social hour and refreshments followed.

At the annual meeting in January the following officers were elected: President, Florence Hill; vice president, G. Downes, Eloise Kirby; secretary, Henrietta Herlihy; treasurer, Susan Hayes. **Buffalo.**—THE MILLARD FILLMORE HOSPITAL SCHOOL OF NURSING held graduating exercises for a class of 23, on May 14, at the Westminster Parish House. Class day exercises were held on May 12, followed by dancing. **Clifton Springs.**—HOSPITAL DAY was celebrated at the Clifton Springs Sanitarium and Clinic by two presentations of a pageant, *The Today of Nursing*, in which graduates and students took part. The pageant showed scenes in the education of a student from her first day until graduation, followed by others depicting different branches of nursing. At the close, a lifelike Florence Nightingale addressed the actors, showing how they were carrying on her work. The pageant was the work of Gertrude S. Bates, Instructor in the School of Nursing. It was most successful and was much enjoyed. At the annual meeting of the Alumnae Association, the following officers were elected: President, Agnes Howard; vice president, Marie Westerlund; secretary, Gertrude Strong Bates; treasurer, Mabel Miller. During graduation week, class day and the Junior reception will be held on June 9; graduation exercises for a class of 12 will be held on June 11 and the Alumnae banquet will be held on June 12. **Dunkirk.**—THE BROOKS MEMORIAL HOSPITAL held graduating exercises for three on May 28, at the Hospital,—its last class, as the school has been discontinued. The Alumnae gave a banquet to the class on May 27, at the Shorewood Club. Camilla Sale, Superintendent of the Hospital, and Ardena Reber, Instructress, have resigned. **New York.**—Anna D. Wolf, for five years Dean of the School of Nursing and Superintendent of Nurses at the Hospital of the Peking Union Medical College, Peking, China, was complimented by a luncheon given in her honor at India House on April 28 by the Rockefeller Foundation, under the auspices of the Peking Union Medical College. Dr. George E. Vincent, speaking of Miss Wolf's distinguished contribution to nursing education in China, said the tribute was in no sense an obituary, although Miss Wolf is not returning to China, but merely an effort to commend

while commendation could still be heard and appreciated. On April 21, the graduation exercises for the fiftieth class to go forth from Bellevue Training School were held in the Lecture Hall of the Nurses' Residence. Dr. John J. McGrath, President of the Board of Trustees of Bellevue and Allied Hospitals acted as chairman. He announced appropriations for new buildings to be used by the nursing schools of Fordham and Gouverneur Hospitals. Both trustees and board of women managers were most hearty in their appreciation of the services of Katherine de Long, who is retiring after fourteen years of devoted and efficient service to the Bellevue Training School. In her annual report Miss de Long refuted the oft-heard complaints that few nurses pursue private nursing at present. Each year 75 per cent. of Bellevue graduates do so for at least six months. Diplomas and pins were presented to the sixty-four members of the graduating class and prizes were awarded as follows: To Ethel Bacon and Marion Shaw, each a \$500 scholarship for further study in nursing; to Katherine Farley and Joan Hepburn, each \$25 in gold, the Mrs. Wm. Preston Griffen prizes for excellence in bedside nursing, and to Margaret Ann Parker the distinguished service medal for devotion to duty and generous giving of herself to aid and inspire patients and fellow students. Annie W. Goodrich, Dean of the Yale School of Nursing, delivered the commencement address. **HARLEM HOSPITAL TRAINING SCHOOL FOR NURSES** offers this year its first recruits to the profession. Thirty-six students were graduated, the first class of colored nurses in New York to receive their diplomas from a city institution. When the school was opened on January 1, 1923, to students from all over the world who could satisfy the requirements of the New York State law, Bellevue, the mother of training schools, added another child to her number. Katherine C. de Long, Director of Nursing Service, told in her report the dramatic story of the founding of the School. Itesna Chandler, President of the Class, spoke earnestly for the graduates. The address was given by Edward C. Carter. Great honor is due Mrs. S. J. O'Brien, Superintendent of Nurses at Harlem for her skilled administration of the school. On April 15, Bellevue School for Men

Nurses (Mills School) held its first graduation exercises under the new charter. The exercises were held at Osborne Hall. Eighteen men received their diplomas and pins and the exercises were short but complete. In the absence of Doctor McGrath, President of the Board of Trustees of Bellevue and Allied Hospitals, the chair was taken by Mrs. Linzee Blagden, acting president of the Board of Managers. Miss K. C. DeLong, retiring Director of Nursing Services, read the report of the school and gave a brief resume of its history. This was followed by the administration of the *Modern Hospital* pledge by the Chaplain (We believe that Mills School is the first to use this pledge as part of their graduation exercises). The address to the graduating class was delivered by Dr. George O'Hanlon, General Medical Superintendent of Bellevue and Allied Hospitals. The diplomas and pins were presented by Mrs. Morris, assisted by F. W. Jones, Superintendent of Men Nurses. The exercises were followed by a dance. THE NURSING STAFF of Bellevue and Allied Hospitals gave a farewell reception for Miss DeLong and presented her with a beautiful wrist watch. Miss DeLong sailed in April for a trip abroad. THE MISERICORDIA HOSPITAL held graduating exercises for a class of 12, on May 12, in the Auditorium of the Nurses' New Residence. The address was given by Rev. Francis P. Le Buffe, Dean of Social Service School, Fordham University. The class repeated the Nightingale Pledge. Diplomas were presented by Rev. Monsignor John F. Brady, Ecclesiastical Superior. Refreshments were served after the exercises. The next class for students will open September 5. ST. LUKE'S HOSPITAL TRAINING SCHOOL held graduating exercises for a class of 42, in the chapel of the hospital, on April 28. THE PRESBYTERIAN HOSPITAL SCHOOL OF NURSING held graduating exercises for a class of 62, on May 7, at Madison Avenue Presbyterian Church. In the evening a reception was held at Florence Nightingale Hall. OMAHA.—THE OSSINING HOSPITAL held graduating exercises for a class of 7, on May 12, at Trinity Parish House. ROCHESTER.—Clara D. Noyes, Director of Nursing Service, American Red Cross, Washington, D. C., was the speaker at a supper meeting of the Genesee Valley Nurses' Association, held at the Gannett House on

April 30. Many students came in for the address which was greatly enjoyed. Graduating exercises for the Schools of Nursing of the ROCHESTER HOMEOPATHIC, the HIGHLAND, and the ROCHESTER GENERAL hospitals were held in Convention Hall, May 26. The address was given by George Sherwood Eddy. The Homeopathic class numbered 26; the Highland, 26; and the General, 34. PARK AVENUE CLINICAL HOSPITAL held commencement exercises of the Nursing School at the Rochester Club on May 20, for a class of 18. A reception and dance followed. SARANAC LAKE.—District No. 8 has had an active and interesting winter and spring season. There is an active and resident membership of forty members. This district also includes the Alumnae Association of the Physicians Hospital of Plattsburg. Application for membership of the Alumnae Association of Champlain Valley Hospital of Plattsburg is pending. Monthly meetings have been held at the Trudeau Memorial Room in the Trudeau Building; in addition, several of the members have acted as hostesses entertaining the Association at their homes where a social hour followed the regular business meeting. The Association is to be congratulated on the success of the Annual Donation Day for the Saranac Lake General Hospital held during November. A sum of \$900 was realized by this affair. It is used for the Free Bed Fund of the hospital, a movement entirely sponsored by the Graduate Nurse Association of Saranac Lake and is for the benefit of the deserving patient of limited means, especially nurses, under treatment at the General Hospital. Louis Sullivan of Wilmington, Del., gave a talk to the Association at the January meeting on Child Welfare Work in Wilmington, where he is supervisor of play grounds. SYRACUSE.—The Credential Committee of the Alumnae Association with the coöperation of the officials of the HOSPITAL OF THE GOOD SHEPHERD are starting a pre-alumnae course for the juniors and seniors in training, to instruct them in the duties of a nurse to the alumnae, the coöperation between the Alumnae and District, the District and State, State and National Associations. This course will consist of lectures on industrial, institutional, visiting, public health, private duty nursing and other instructive topics. The first was an illustrated lecture on

American Art, by Prof. Rilla E. Jackman, Art Director of Teachers College, Syracuse University. On May 28, Dr. Clara Jones, who is in Syracuse after spending ten years in China, told of her medical and nursing experiences while in that country. **Utica.**—THE FAXTON HOSPITAL ALUMNAE ASSOCIATION held its annual meeting in the Florence Nightingale Home, March 10. The following officers were elected: President, Hazel Godfrey; secretary, Bertha Rowcroft; treasurer, Etta Carr. **White Plains.**—The tenth anniversary of THE BURKE FOUNDATION's opening of its institutions was commemorated by a dinner to Dr. Frederic Brush, the Medical Director. Addresses were made, the founding and services of the Foundation were reviewed and extension plans for the future assured. **Warsaw.**—THE WARSAW HOSPITAL held graduating exercises for a class of eleven, on May 12, in the Presbyterian chapel. The diplomas and pins were presented by George A. Clark; the Nightingale Pledge was administered by Christian Stewart.

North Dakota: THE NORTH DAKOTA STATE NURSES' ASSOCIATION held its thirteenth annual convention in Bismarck. Dr. Caroline Hedger of Chicago was the speaker. All who have heard Doctor Hedger will know what a treat was enjoyed. During the meetings the St. Alexis Hospital served tea and the Bismarck Evangelical Hospital held a diabetic demonstration. Both were very attractive affairs. Among the special features might be mentioned the organizing of the Private Duty nurses into a section. Nellie Mikkelsen of Devils Lake is chairman and Minnie Gutterud, of Oberon, secretary. The next annual meeting will be held in Fargo. The officers are: President, Edith B. Pierson, Fargo; vice presidents, Mrs. Sveinbjorn Johnson, Bismarck, Sister M. Gilbert, Fargo; secretary treasurer, Mrs. W. L. Morris, Jamestown; corresponding secretary, Esther H. Teichmann, Bismarck; directors, Wanda Kurth, Mabel O. Olsen, Josephine Stennes, Luella Riste. One notable thing was the great interest of the lay people during the meeting and a goodly number of them came out for sessions.

Ohio: The twenty-second annual convention of the OHIO STATE ASSOCIATION OF GRADUATE NURSES was held at the Academy of Medicine, Toledo, April 28-30. Mayor

Bernard Brough opened the convention with a short address of welcome, which was followed by a response and annual address by the president, Caroline V. McKee. Harold E. Williams, Principal of the Libbey High School, Toledo, spoke on the topic, "Let Age Approve Youth." Helen F. Greaney, National Chairman of the Private Duty Section, Philadelphia, whose subject was "The Private Duty Nurse, Past and Present," said that the nurse can do her greatest piece of work educating the mothers with whom they deal in maternity cases. Clara D. Noyes, Director, Red Cross Nursing Service, Washington, D. C., addressed 500 nurses at a Red Cross Dinner. Preceding Miss Noyes' address, a group of tableaux depicting the work of the Red Cross were given by the local committee. The entire program was interspersed with music. An unusually successful general conference was conducted by V. Lota Lorimer of Columbus. The speakers were limited to five minutes and the discussions to three minutes. The subject material came from the fifteen districts of the State who not only furnished the questions but speakers. (a) American Journal of Nursing, M. Anna Gillis, Cleveland; (b) Graduate Nurse and the Care of the Obstetrical Patient in the Home, Betty C. Connelly, Cleveland; (c) Interest within Our Own Professional Group, Hulda Wyland, Toledo; (d) What Can the Nurse Registries Do To Equalize Nursing Service in the State, Mary E. Yeager, Toledo; (e) What Methods Are Being Used by Public Health Organizations To Keep the Staff Nurses Informed in New Methods and Procedures in Nursing, Edith Tooker, Cincinnati; (f) The Relation of the Private Nurse to the Community in Caring for the Sick in Their Homes, Clara F. Brouse, Akron; (g) Ways and Means of Getting Cooperation of Teachers and Parents in the Care of the School Child, Mrs. Marguerite Crumm, Athens; (h) What Measures, if Any, Can Be Taken To Have All Graduate Nurses in the State Registered? Augusta M. Condit, Columbus; (i) Why Do Not More Nurses Take Up Institutional Work? Faye Crabbe, Columbus; (j) Should Small Hospitals Have Training Schools for Nurses? Jessie Horn, Bellaire; (k) Group Nursing, Fern Young, Dayton; (l) How Can Responsibility Be Instilled in the Minds of Nurses in Caring for the

Equipment in the Hospital and Furniture in the Home? Anna Campbell, Cleveland. Other speakers appeared and presented the following: Private Duty Nursing, Georgia Steen, Cleveland; Social Activities in Schools of Nursing, Ruby Parker, Cincinnati; Nursing in Foreign Fields, Ruth Bridge, Cincinnati; Newer Methods in Correlation of Theory and Practice, Edith Pearson, Cleveland; Tuberculosis Nursing, M. Louise Powell, Dean, Western Reserve School of Nursing, Cleveland; Health Program for High Schools, Luty V. Neville, Toledo; Health Education in Colleges, Elsie Druggan, Athens; The Normal Child, Edna White, Merrill Palmer School, Detroit, Mich.; The Marsh Foundation, Dr. R. R. Reeder, Van Wert. The dinner at the Woman's Club given to the Officers and District Presidents by the Toledo Hospital; the Rally and Dance; the Tea served at St. Vincent's Hospital, School of Nursing; the Tea served by the Robinwood Hospital Alumnae at the Academy of Medicine and the Student Nurse Dinner at Maternity and Children's Hospital were delightful indeed and very much appreciated. The instrumental music, solos, student chorus and community singing gave spice to the whole program. Senior student nurses of the Toledo schools attended the Red Cross banquet. A daily bulletin was ready for each day's meeting and kept the five hundred and ninety who attended informed as to what to do next. The Akron nurses came by one of the famous Akron buses. The slogan used on the advance notices of the meeting which happened to be yellow and black stickers, was "Every Nurse a Member in 1925." Ohio has increased its association membership by adding 346 new members. The nurses of District No. 9 and the Program Committee and all who assisted in any way deserve much credit for making the convention well worth while. Officers elected are: President, Mary Jamieson, Columbus; vice presidents, Caroline V. McKee, Columbus, and Clara F. Brouse, Akron; secretary, Mrs. Lucille Grapes Kinnel, 199 Webster Park, Columbus; treasurer, Mrs. Nette Deyell Schnabel, Lima, Cincinnati. —THE BETHESDA HOSPITAL ALUMNAE ASSOCIATION assisted by the Student Nurses' Glee Club, gave a pageant on May 4, at the Medical College, on the Progress of

Modern Nursing. Three scenes of Florence Nightingale were given: (a) prenursing age, (b) a nurse in the Crimea, (c) directing nursing schools. While the recitation *The Lady With the Lamp* was being rendered, the statue of Miss Nightingale was portrayed. Following, were Doctor Dimock, Linda Richards, Sister Helen of the Catholic sisterhood; a Protestant sister from Keiserwerth, Miss Mahoney; Jane Delano, Clara Noyes, Clara Barton, Dorothy Dix, Lillian Wald, etc. A pleasant as well as a profitable evening was enjoyed by all who were privileged to see the pioneers of the nursing profession seemingly step out on the stage from the long ago. THE JEWISH HOSPITAL SCHOOL FOR NURSES held graduating exercises for a class of 22, on May 21, in the Auditorium of the Hospital. The address to the class was given by Henry W. Bettman, M.D. Diplomas and medals were presented by Samuel Straus. Prizes were presented by Samuel Rothenberg, M.D. Class day exercises were held May 20, in the Educational Building. THE SCHOOL held Hospital Day exercises in the auditorium of the hospital, May 12. Rev. Frank H. Nelson was the speaker of the evening. After a musical program, the picture *In Florence Nightingale's Footsteps* was shown. CLEVELAND. —THE LUTHERAN SCHOOL OF NURSING is publishing its first annual which is being called "The Summary." The publication of this is due to the efforts of Irene Wiehl, Editor and President of the Senior Class; and Mrs. Beulah Secrest, assistant Editor. The students were very delightfully entertained by the Lutheran Church Society on April 16 with a concert. The Junior Class of the MT. SINAI SCHOOL OF NURSING gave an entertainment at the Euclid Avenue Temple, May 7. The program consisted of a one-act playlet, directed by Verda Stuart, director in English. A dance followed. The annual meeting of the SECTION ON NURSING EDUCATION OF DISTRICT No. 4 was held at the Cleveland Nursing Center, May 13. The speaker for the evening was Anna Wolf, Peking, China. Hostesses for the evening were the staff of St. Luke's Hospital. District No. 4 held its regular monthly meeting at the Cleveland Nursing Center on May 19. Reports from the State Convention at Toledo were given, with a social evening following. COLUMBUS. —THE TWELFTH DISTRICT

ASSOCIATION held its April meeting at the Columbus State Hospital, through the courtesy of Doctor Pritchard, Superintendent of the Hospital, Louise Dildine, Superintendent of Nurses and Mrs. Emily Bitzer, of the Welfare Department. Doctor Pritchard held psychiatry clinics, one in the women's department and one in the men's department, showing many types of cases, giving very interesting histories and explaining very understandingly the prognosis of each. The nurses felt that it was indeed educational and that too little of this phase of nursing is accessible. A very delightful tea was served by Mrs. Pritchard, which was enjoyed and appreciated. The Association held its May meeting at the Lazarus Tea Room. Reports were given by the delegates who attended the State Convention in Toledo. Each delegate reported the section which she represented so that practically everything of importance was covered. District 12 is again honored in having the state president, Mary Jamieson, chosen from its numbers. Miss Jamieson was the guest of honor at the meeting. Youngstown.—DISTRICT 3 met at the Stainbaugh Nurses' Home, Youngstown Hospital, April 15. Mrs. Elizabeth August, State Secretary, gave a very interesting talk on Nursing Organization. Delegates were elected to attend the State convention. The Alumnae of the Youngstown Hospital acted as hostesses.

Oregon: Portland.—THE NURSES' STUDY CLUB met April 24 at the Business and Professional Women's Club rooms. Dr. H. Moore gave an excellent talk on French Literature. The department of public welfare of the Oregon Federation of Women's Clubs of which Grace Phelps is chairman, held a three-day institute, ending with National Child Health Day, May 1. Topics covered during the institute included the work of the division of Public Health, that of the Revision of Anti-Narcotics, Disabled Children's Hospital, and Educational Service, Indian Welfare and Child Welfare. The following papers were read by nurses: The Value of the Dispensary, Cecil L. Schreyer; Demonstration of Home Care of the Sick, Mrs. G. Lee Hynson; Services Extended to Our Ex-service Men, Jane V. Doyle; Suggestions for Making a Survey of Community Needs, Grace Holmes; Report of Bureau of Child Hygiene, Mrs. Glendora

Blakeley. The Alumnae Association of St. Vincent's Hospital gave a very successful bazaar on April 22 and 23. The proceeds are to make up a purse to be given to the Sisters of St. Vincent's Hospital in honor of the Golden Jubilee of the founding of their hospital in Portland, which occurs in June. The approximate amount realized was \$1,750. Miss Crow, Miss Quirk and Miss Halversan, all of the Visiting Nurse Association, gave splendid talks to the Senior Class of St. Vincent's School for Nurses. This completes a series of five talks from the Association.

Pennsylvania: THE HOSPITAL ASSOCIATION OF PENNSYLVANIA held its fourth annual conference and exposition of hospital supplies and equipment, at Hotel Adelphia, Philadelphia, April 14-16. Among the many interesting features of the meetings was the Section on Nursing. The Objectives in Nursing Education was the subject discussed: What They Are, S. Lillian Clayton, Philadelphia General Hospital; How We May Obtain These Objectives—(a) By Developing Skill in Nursing Practice, Alice Garrett, Methodist Hospital; (b) By Teaching the Scientific Principles Underlying the Skill, Stella Goostray, Philadelphia General Hospital; (c) By the Nurture and Developing of the Spirit of Service, Marie C. Eden, Presbyterian Hospital. This was followed by a discussion from the floor. Allentown.—THE ALLENTOWN STATE HOSPITAL NURSES' ALUMNAE ASSOCIATION held a business meeting and banquet in April at the Hotel Traylor, at which the senior nurses were entertained. This meeting had a twofold purpose, to induce the new graduates to register immediately after graduation and to join their alumnae at once. The following officers were elected: President, Frances Mueller; vice president, Evelyn Morgan; secretary-treasurer, Mrs. Carrie Locker. Bethlehem.—ST. LUKE'S HOSPITAL ALUMNAE ASSOCIATION held its April meeting at the Victoria White Nurses' Home, with thirty-five members present. Mabel B. Young, Assistant Superintendent of the Severence Hospital, Seoul, Korea, who is a member of the association, was the principal speaker. Miss Young took for her subject, The Field of Nursing in the Orient. The Senior students were guests. A social hour followed. Clearfield.—THE CLEARFIELD HOSPITAL ALUMNAE ASSOCIATION

entertained the graduating class at a dinner at Waterstreet Inn, May 5. The regular monthly business meeting followed. Graduating exercises were held in the High School auditorium, on May 7, for a class of 8.

Philadelphia.—THE HAHNEMANN HOSPITAL NURSES' ALUMNAE ASSOCIATION held its annual election of officers in January. The loyal support and service of their retiring president, Agnes E. Jacobs, is greatly appreciated by the nurses. The "Probs" entertained the Association in their class room with a travesty of the Progress of Nursing, which was much enjoyed. In March the Association donated its usual fee of \$50 to the Welfare Federation of Philadelphia. Card parties are held weekly at the Supervisors' home to increase the fund to buy flowers for sick nurses. Miss Stradling held a Rummage Sale and realized \$112 which will be given to the Endowed Room Fund. To defray the expenses of a delegate to Finland, a musical and dance was given at the Academy Foyer, on April 20. This was a social and a financial success. Five shares of Building and Loan Stock have been taken by the Endowed Room Fund, to perpetuate its resources. A check for \$88.50 was received from the estate of Cora E. Stoevers, in loving appreciation for the kindness shown her in her last illness. Everybody is discussing the Central Registry and Community House.

St. Joseph's Hospital School of Nursing held graduating exercises for a class of 19, on April 17, at the Cathedral of Saints Peter and Paul. D. Cardinal Dougherty presided.

Pittsburgh.—THE ALLEGHENY GENERAL HOSPITAL held graduating exercises for a class of 12, on May 14, at the First United Presbyterian Church. The address was given by Thomas Stockhan Baker, Ph.D., President of Carnegie Institute of Technology; presentation of diplomas, Edward B. Hackel, M.D., of the Medical Staff; Lottie A. Darling, Principal of the School of Nursing, presented the pins. After the exercises, a reception was held at the Nurses' Home.

THE ALLEGHENY GENERAL HOSPITAL SCHOOL OF NURSING GLEE CLUB gave a concert at Carnegie Music Hall, Pittsburgh, May 11. The proceeds will be used for the Endowment Fund.

Wilkes-Barre.—THE WILKES-BARRE GENERAL HOSPITAL held its thirty-sixth commencement in the High School auditorium on May 22. A

class of 26 was graduated. A reception in the Banquet Room of the High School Building, followed the exercises.

Rhode Island: THE RHODE ISLAND STATE NURSES' ASSOCIATION held its quarterly meeting at the Medical Library, Providence, May 7. Following the business meeting, Ada Sawyer, President of the Rhode Island Federation of Women's Clubs, gave an interesting talk on the Spirit of the Federation. Dr. Halsey DeWolf spoke on Private Duty Nursing. Miss Erpestad, Superintendent of the Nursing School at Rhode Island Hospital, had charge of the question box. A social hour with tea followed.

THE RHODE ISLAND ORGANIZATION FOR PUBLIC HEALTH NURSING held its quarterly meeting in the Medical Library, Providence, April 23. The program began with round table conferences for both nurses and sustaining members. Mary M. Richardson, Instructor, Providence District Nursing Association, gave a practical demonstration of a maternity visit. The speakers were, Dr. Marion A. Gleason, Child Welfare Division, State Board of Health; Dr. Ella A. Stone, Director of Child Hygiene, Providence Health Department; Helen Fahey, Child Welfare Department, Providence District Nursing Association; Nora McQuade, Maternal and Infant Welfare Commission, Fall River, Mass., who discussed Child Welfare work from the angle of the state, city, private organization and state commission. More than one hundred members were present. Under the auspices of the Education Committee of RHODE ISLAND STATE LEAGUE OF NURSING EDUCATION, the senior students of the Nursing Schools in the State were entertained at Ray Hall, Butler Hospital, on the evening of April 16. The meeting was opened with a welcome to the students by the President of the League, Sara Barry, then turned over to the Chairman of Education Committee, Anna K. McGibbon. Community singing under the direction of John B. Archer was followed by a greeting from Lucy Ayers, spoken on behalf of Linda Richards. The main speaker of the evening was Mary M. Marvin, Department of Public Health Nursing, Simmons College.

Providence.—ST. JOSEPH'S NURSES' ALUMNAE held its quarterly meeting at the Nurses' Home, April 29. A

program committee consisting of nurses representing the various fields was named to arrange meetings for the coming year. The annual dance in honor of the graduating class was held at the Plantation Club, under the direction of the Finance Committee. At the weekly staff meeting of the Providence District Nursing Association held on May 12, Elizabeth G. Fox, Director, Bureau of Public Health Nursing of the American Red Cross and President of the National Organization for Public Health Nursing, gave an address. The meeting was attended by nurses and lay members, all of the public health organizations in the state being represented. St. Joseph's Hospital held graduating exercises for a class of 19, on May 12. The diplomas were presented by Right Rev. Bishop William A. Hickey, D.D., president of the corporation. The graduates were presented by Frank B. Beckett, M.D., president of the staff; an address to the students was given by Philomenon H. Truesdale, M.D. Woonsocket.—The April meeting of the WOONSOCKET HOSPITAL NURSES' ASSOCIATION, held on April 22 in the Nurses' Home, took the form of a reception for Margaret Dearness, the new Superintendent of Nurses. Winifred Fitzpatrick, Associate Director of the Providence District Nursing Association, was the principal speaker. Addresses were given by Lucy Ayers, Superintendent of the Hospital, and Miss Dearness.

South Carolina: The forty-third annual convention of the SOUTH CAROLINA GRADUATE NURSES' ASSOCIATION met in Chester, April 29-30. At ten o'clock Wednesday morning the meeting was called to order by the President, Miss A. B. Commer. Dr. Flourny Shepperson, pastor of Purity Presbyterian Church, made the opening prayer, and appropriate welcome addresses were made by Mayor S. Churchhill Carter and Mrs. Z. Vance Davidson, representing respectively the city of Chester and the Federated clubs of the city. The Association's response was delivered by Etta Robbins of Camden. Following the opening exercises the Association took up its program of papers and addresses, all of which were of an intensely interesting character. Lillian Alexander, Director of Nursing in the Rock Hill Public Schools, spoke on Taking Health into the Schools. A discussion of this paper was led by Miss Lockwood of

Darlington. Dr. James McDowell of York read a paper on Tuberculosis, Its Diagnosis and Care. This address was a masterpiece. Doctor McDowell characterized fear of tuberculosis as "superstition." Dr. Robert Abell of Chester next spoke on a subject which deeply interested the entire nursing profession, The Small Hospital Training School. This paper was discussed by Mary McKenna, Directress of Nurses, Columbia Hospital, and Miss Erdmann, Directress of Nurses, Roper Hospital, Charleston. A paper by Floride Lesesne of Charleston, on The Hospital Private Duty Nurse, was read by the Secretary, in the absence of Miss Lesesne. In the afternoon the nurses were given a ride over the city by the Chester Chamber of Commerce, following which a delightful garden party was given in their honor at the home of Mr. and Mrs. L. E. Brown on York Street by the Civic League and Chamber of Commerce. At 8:30 o'clock, Wednesday evening, a most delightful banquet was tendered the Association at the Baptist Sunday School building by the Chester Sanatorium. Mr. Angus McCauley was toastmaster—and a rare good one, too. Solicitor J. L. Glenn, Jr., Prof. R. C. Burts of the Rock Hill Schools, Dr. W. R. Wallace, Miss A. B. Commer, President of the Association, and Mary C. McKenna were the speakers, and most interesting indeed were their remarks. Doctor Wallace gave a resume of the work the State has done in the way of Public Health Work, and showed how unfair is much of the criticism of South Carolina for being backward in this particular, as there is an excessive negro population, much of which is migratory, and contracts diseases, especially tuberculosis, in the North, only to come home in that condition in time to die and swell South Carolina's death rate. Professor Burts is a staunch believer in the nurse in the public schools and made a splendid presentation of his subject, closing with a beautiful tribute to his own school nurse. Miss Commer and Miss McKenna brought out many points in their talks, of exceptional interest to the laity, as well as the profession. Solicitor Glenn's talk was in the nature of welcome, and was full of wit and fun. Music and a recitation helped make the evening one of pleasure for all present. Thursday morning at nine o'clock there was

a meeting of The League of Nursing Education, presided over by Miss M. C. McKenna. There was a general round table discussion and an election of one new member on this educational committee for South Carolina, Mrs. E. G. Mouzon of Florence. At ten o'clock the Association was called to order by the president, Miss A. B. Commer, whose annual address was the first number on the program. This was followed by the reading of the minutes, reports from the Districts, all of which made a wonderful showing. The chairmen of the various committees made their reports. Then came the election of officers which resulted as follows: President, Miss A. B. Commer, Florence; vice presidents, Mary Gullidge and Laura Blackburn, Columbia; secretary, Mrs. E. G. Mouzon, Florence; treasurer, Mrs. B. M. Sigmund, Chester; counselor, Marguerite Andell, Charleston. Resolutions of appreciation and thanks were tendered the city of Chester, District 4, the Civic League, the Chamber of Commerce and the Rock Hill Medical Society. Next year's meeting will be held with District 5, in Anderson, Greenville or Spartanburg. Shortly after adjournment the Association left for Rock Hill by automobile where they were the guests of Winthrop College and the Rock Hill Medical Society. After being shown over the College the guests were taken to the Confederate Park Country Club where a splendid reception was tendered them. From the club the guests were taken to the Fennell Infirmary where punch and mints were served. The members of the South Carolina Graduate Nurses' Association departed for their homes with a feeling of most delightful friendship and appreciation for the people of Chester and Rock Hill.

South Dakota: THE SOUTH DAKOTA STATE NURSES' EXAMINING BOARD will hold an examination for registration of nurses at the Capitol Building, Pierre, July 7-8, 1925. Applications must be filed with the Secretary, Mrs. Elizabeth Dryborough, Rapid City, at least two weeks in advance of the examination.

Tennessee: Knoxville.—(To correct an error published in the May *Journal*.)—Rose Z. Van Vort will leave the Knoxville General Hospital at the expiration of her contract for one

year's service in reorganizing the hospital and training school. She will be succeeded by Mr. T. T. Murray, of the Saskatoon Hospital in Canada. Montez Wayne has been appointed Director of the Training School. Many improvements have been made during Miss Van Vort's term of service and appreciation of her work has been shown by public officials and by people of all creeds.

Wisconsin: THE THIRD DISTRICT held a meeting, March 10, at the home of Mrs. F. Gratz. Adda Eldredge spoke on the advantages of forming a Private Duty Section. The private duty nurses were the hostesses and served luncheon. The Third District League of Nursing Education was organized on March 28. At the FOURTH AND FIFTH DISTRICT regular monthly meeting, held April 14, Mrs. W. Barrer gave an excellent report from the meeting of the County Federated Clubs and Ruth Kale an interesting report from the meeting of the Public Health nurses held recently in Madison. The ELEVENTH DISTRICT held its regular meeting at the Pure-air Sanatorium near Bayfield on March 28. Doctor Fawcett gave a paper on the Social Aspect of Tuberculosis. A tour of inspection of the Sanatorium was made and luncheon was served. Alma Brunk, who has been with the Milwaukee Health Department since 1917 with the exception of two years war service, has been promoted to superintendent of the nursing department. The Marquette University Alumnae Association are establishing a library for the Marquette University Hospital College. Fond du Lac.—ST. AGNES HOSPITAL SCHOOL OF NURSING held graduating exercises for a class of 8, on May 12, at the New Garrick Theatre. The Juniors gave a dinner on April 28 at the Nurses' Home; the Intermediates gave one on April 30 at the Athearn Hotel; the Alumnae gave one on May 11 at the Hospital. The Alumnae reunion took place May 11-13. Oshkosh.—The March meeting of the FIFTH DISTRICT was held in Oshkosh and was combined with one of the Medical Society. The two associations met for dinner after which addresses were given by a neurologist and by Mae Kennedy of Chicago, both of which were greatly appreciated.

MARRIAGES

Bernice Black (class of 1923, Proctor Hospital, Peoria, Ill.), to **Ralph Folkerts**, March 21. At home, Peoria.

Elle M. Buckwalter (class of 1919, Hahnemann Hospital, Philadelphia), to **C. Wayne Bowen**, in March.

Matilda Cantrell Degan (class of 1905, Methodist Episcopal Hospital, Philadelphia, Pa.), to **Rev. Augustus Sherman Buchanan**, April 25.

Naomi Geist (St. Joseph's Hospital, Reading, Pa.), to **Claude L. Penkle**, April 22.

Mary Larmour Houston (class of 1923, Lankenau Hospital, Philadelphia, Pa.), to **Paul Edward Loudenslager, M.D.**, May 6. At home, Tainan, Shantung, China.

Mildred Jarvis (class of 1917, Clifton Springs Sanitarium), to **Frank Judson, M.D.**, May 5. At home, Lyn, Ontario, Canada.

Emma Kirk (class of 1923, William McKinley Memorial Hospital, Trenton, N. J.), to **Earl Donakson Snook**, April 19.

Rachel Lloyd (class of 1923, Mission Hospital, Asheville, N. C.), to **Thomas W. Brown**, on April 11. At home, Asheville.

Elizabeth Lyons (class of 1912, Georgia Baptist Hospital, Atlanta, Ga.), to **T. F. McGahee**, April 12.

Annette Magnus (class of 1919, St. Vincent's Hospital, Portland, Ore.), to **Harry DeRansie**, April 12.

Alida Josephine Magnuson (class of 1905, Bethesda Hospital, St. Paul, Minn.), to **Rev. Thomas T. Carlson**, March 24. At home, Souris, N. Dak.

Rebecca Mohney (class of 1916, Allegheny General Hospital, Pittsburgh, Pa.), to **David Glass**, May 6. At home, Birmingham, Ala.

Lida Moore (class of 1920, The Christ Hospital, Cincinnati, Ohio), to **H. S. Sanders**, March 19. At home, Leesburg, Ohio.

Edna Norris (class of 1914, Clifton Springs Sanitarium, Clifton Springs, N. Y.), to **Joseph Pound**, in May. At home, Brighton, Ontario, Canada.

Helen Patton (class of 1924, Christ Hospital, Cincinnati, Ohio), to **Harold J. Norton, M.D.**, April 27. At home, Columbus, Ind.

Frances O. Sahiberg (class of 1921,

Bethesda Hospital, St. Paul, Minn.), to **Harry E. Anderson, M.D.**, March 4.

Elizabeth Shreve (class of 1924, Methodist Episcopal Hospital, Philadelphia, Pa.), to **Oscar Goodwin, M.D.**, on April 11.

Madeline Stillwagon (St. Mary's Hospital, Pittsburgh, Pa.), to **William M. McGlocelin**, April 23. At home, Asheville, N. C.

Marguerite Swanburg (class of 1924, Jennie Edmundson Hospital, Council Bluffs, Ia.), to **Viggo Olson**, May 2. At home, Omaha, Nebr.

Myrtle Vaughan (class of 1918, Montana Deaconess Hospital, Great Falls, Mont.), to **Frank P. Hooks**, April 14. At home, Townsend, Mont.

Louise Josephine Wenke (class of 1909, Elizabeth General Hospital, Elizabeth, N. J.), to **Charles G. Gore**, April 18. At home, Asheville, N. C.

Minnie Wilcoxson (class of 1919, Woolford-Johnson Infirmary), to **J. Esker Catlett**, April 12. At home, Chattanooga, Tenn.

Mildred Williamson (class of 1923, Biltmore Hospital, Biltmore, N. C.), to **Carl J. Justice**, April 23. At home, Raleigh, N. C.

Mary Louise Wilson (class of 1920, Christ Hospital, Cincinnati, Ohio), to **David A. Tucker, Jr., M.D.**, May 2. At home, Cincinnati, Ohio.

Gertrude Wuesthoff (class of 1915, Allegheny General Hospital, Pittsburgh, Pa.), to **Bernard E. Alspaugh**, April 2. At home, Charleston, W. Va.

DEATHS

Bernetta Beinkofner (class of 1918, Marquette University Hospital, Milwaukee, Wisconsin), at Marquette University Hospital, April 6, after a very brief illness. Miss Beinkofner did some private duty and some institutional work, but for the past year she had been a member of the Milwaukee Visiting Nurse Association staff. She was an efficient nurse and much loved both by her patients and by her sister nurses. Burial was in her home town, Spring Green, Wisconsin. Her co-workers from the Visiting Nurse Association staff paid their last tribute to her by escorting the body to the train at half past six in the morning.

Mrs. Grace McKelvy Campbell (class of

1917, Bellevue Hospital, New York), on April 8, at Memphis, Tenn., after a long illness of tuberculosis.

Helen Gaare (class of 1924, St. Joseph's Hospital, St. Paul, Minn.), on May 3, of tuberculosis, after an illness of several months.

Nora B. Harrison (class of 1921, Methodist Episcopal Hospital, Philadelphia, Pa.), on February 10, met a tragic death in a railroad accident near her home at Marcus Hook, Pa. Miss Harrison was a private duty nurse and was loved by all who knew her. She was very faithful in her work; her death is a great loss to the nursing profession.

Katharine Henderson (class of 1921, Christ Hospital, Cincinnati, Ohio), at her home in Whittier, California, after a long illness. Miss Henderson was an efficient nurse, loyal to her profession and friends. Her death means a great loss to her family and to a host of friends.

Mrs. Mary Connor (Mary MacMulkin), class of 1908, Polyclinic Hospital, Philadelphia, Pa.), on Easter morning, April 12, at her home in Freehold, N. J.

Theodosia Mattison (class of 1925, McKinley Hospital, Trenton, N. J.), on April 19, of pneumonia. Miss Mattison was a student nurse and would have been graduated in June.

Gertrude J. Olsen (class of 1913, Passavant Memorial Hospital, Chicago), suddenly, May 1, in Ravenswood Hospital, following an operation. Miss Olsen was for three years Night Supervisor and Head Nurse of the Maternity Ward in Passavant Hospital and became a member of the staff of the Visiting Nurse Association in 1917. In the summer of 1923 she held a Harriet Hammond McCormick Scholarship at Teachers College and for more than a year had been Supervisor of the Humboldt Sub-station territory. Miss Olsen's many associates in Passavant, in the Visiting Nurse Association and in hundreds of district homes where she was always a welcome visitor, will say with Emerson:

"Nor knowest thou what argument
Thy life to thy neighbor's creed hath lent."

Mrs. J. R. McFadden (Elizabeth Poppelbaum), class of 1911, Norton Infirmary, Louisville, Ky.), on January 14, suddenly of pneumonia, while doing private duty nursing at a home where she had been for two and one-half years. Mrs. McFadden was beloved by all who knew her. Burial was at Milford, Texas.

Addie Smith (class of 1915, Methodist Episcopal Hospital, Philadelphia, Pa.), on May 6, at the home of her sister, Shawnee-on-Delaware, Pa. Miss Smith was in the Overseas Unit during the war.

S. Kaye Stewart (a member of the Senior class, Jordan Hospital, Plymouth, Mass.), on April 12 of lobar pneumonia, after an illness of two weeks. Miss Stewart took much pleasure in preparing for her graduation which was to take place in June. Her death comes as a terrible shock to her family. Burial was at Melrose, N. S.

Cora E. Stoever (class of 1914, Hahnemann Hospital, Philadelphia, Pa.), on January 23, at the Hahnemann Hospital. Miss Stoever had been ill for nearly two years. She was one of those fine characters with whom it does one good to come in contact. In health and in sickness she was patient, lovable and loyal. In the hearts and minds of her associates she has created a loving memory as her memorial. Burial was at Newcastle.

Lucy Williams (class of 1922, Reid Memorial Hospital, Richmond, Ind.), March 14, in Orlando, Fla.

Sarah Woglam (class of 1901, Faxon Hospital, Utica, N. Y.), on April 14, in Washington, D. C.

Elizabeth Woste (class of 1917, Mt. Carmel Hospital, Columbus, Ohio), on April 8 at her home in Dayton, Ohio. Miss Woste's death followed a very brief illness of pneumonia, and as a great shock to her many friends. Miss Woste was very faithful to her profession and was known for her executive ability, her work being mainly institutional. She will be greatly missed.

BOOK REVIEWS

A SHORT HISTORY OF NURSING. By Lavinia L. Dock, R.N., in collaboration with Isabel Maitland Stewart, A.M., R.N. 419 pages. Second Edition, Revised. G. P. Putnam's Sons, New York and London. Price, \$3.

The second edition of this book which has been very carefully revised and in part rewritten is an exceedingly valuable textbook, well coordinated and well arranged. The new arrangement of material is logical and convenient. For example, Nursing in Foreign Countries immediately follows Nursing in America, and then are given historical sketches of special lines of work with illustrative material drawn from the indicated countries.

The text has been brought thoroughly up-to-date and is replete with references to sources of more complete data. Doubtless, many readers will deplore the omission of the brilliant record of American nurses in the World War but readers are, properly enough perhaps, referred to the History of American Red Cross Nursing with which all nurses should be familiar. One guesses that it was the hand of that ardent pacifist, Miss Dock, that deleted all reference to war except its permanent results to nursing.

The final chapter, "The Past and the Future," is a most admirable discussion of the claim of nursing to professional status and of the ethical principles involved in and aiming its development.

A new appendix on Nursing in Art has been included.

The style is terse and vivid, and the exposition so stimulating that students

should be inspired to obtain a yet wider knowledge of the history of the profession. The probable demand for further knowledge has been provided for, not only by textual references, but also by the extensive bibliographies given with each chapter.

M. M. R.

THE CHILD: HIS NATURE AND HIS NEEDS: A Survey of Present-Day Knowledge concerning Child Nature and the Promotion of the Well-being and the Education of the Young. Edited by M. V. O'Shea, Professor of Education, University of Wisconsin. Illustrated. 516 pages. The Children's Foundation, Valparaiso, Indiana.

This book should be in the library of every school of nursing. It is written by a group of men and women eminent in the field of child study, "for practical use everywhere by those who are in immediate contact with children, fashioning their intellect, moulding their character and influencing their physical development." We have known for many years that the daily problems we meet when caring for little children are the subject of scientific study and are capable of rational solution, but the very terms in which the scientist discusses the development of the child make his study seem immeasurably removed from the babies brought to our clinics and the children in the busy wards of a modern hospital. In *The Child, His Nature and His Needs*, are pictures of our flock on every page; and it is clearly recognized that only through mother, teacher, nurse—those who spend their days with children—can the

lives of the coming generation receive the benefit of a scientific study of childhood.

The reason why nurses should study this book is found within the book itself. It is logically demonstrated that the care of the child's physical body and of his character development cannot be separated. Whoever is responsible for the child's environment has an opportunity to assist or retard his moral development. Our problem is one with that of the mother and the teacher, "so to care for the child that he shall come to modify his natural instincts thoroughly in the interests of the group as a whole." This is a problem in the home, in the school, in the clinic, in the hospital; we must accept the full responsibility of furthering its solution while the child is under our care, and it often seems that his perceptions are unusually keen when in the strange environment of the hospital ward.

We must know the normal child that we may keep well children well and help the sick child to recover; we can nowhere find a more helpful discussion of the mental and physical characteristics of normal children than is presented in this book. Though no definite scale of normal performance in the daily home life is given, a few of the things that a normal child from two to four years of age can do for himself are listed, with an interesting survey of the physical causes of many childhood traits which adults find most irritating.

The discussion of the psychopathic or nervously unstable child bears even more closely upon the nurse's work, and the section upon the relation of nutrition to mental and moral development closely portrays the objective for which we

work, when day after day we endeavor to instill the principles of hygienic living into the minds of our patients, both by precept and by practice.

The mental attitude and general feeling of inferiority of the physically unfit are not only discussed but the general line of treatment is given. Those of us who have instinctively tried to create "opportunities for success," that these children may gain confidence, will doubly appreciate this enlightening chapter.

Our advice to every nurse who loves to work with children is that she beg, borrow, or steal this book and read it from cover to cover.

GLADYS SELLEW, R.N.,
Cincinnati, Ohio

BACTERIA IN RELATION TO MAN. By Jean Broadhurst, Ph.D. Illustrated. 304 pages. J. B. Lippincott Company, Philadelphia. Price, \$3.

This book is a combination of text and laboratory outlines and as stated by the author in the preface, "is designed as an introduction to microbiology." Beginning with a general discussion of cells, the chapters following take up the study of molds including yeasts, bacteria and protozoa, bacterial culture and activities, physical and chemical agents and conditions, air, water and milk, soils and the nitrogen cycle, economic phases of bacteriology, micro-organisms and human disease, with a final chapter on the historical setting of present-day bacteriology. Each chapter is divided into lecture and reading outlines, demonstration and laboratory work, information on references and pamphlets, review and study questions. The splendid organization of subject

material, as outlined, stimulates the desire to make use of the open spaces for additional notes, thus greatly increasing the individual value of the book.

The appendix contains very useful data on making various culture media, stains, indicators and other material required in the growth, cultivation and study of micro-organisms. Comprehensive definitions are to be found in the glossary, also interesting types of questions for examinations. The numerous illustrations of bacteriological slides, results of bacterial growth under artificial and natural conditions, charts, graphs, maps, and diagrams of apparatus, add much to the instructive purpose of the volume and make practical application almost certain.

The helpful as well as harmful relations of bacteria to man are very definitely described and demonstrated. The subject of immunity is discussed in Part II, a separate volume by the same author, *How We Resist Disease*.

Professor Broadhurst is well known to many nurse instructors who will welcome this her most recent publication as an inspirational guide in planning and directing courses in elementary bacteriology. Furthermore this contribution should improve standards and methods used in teaching the subject to students in schools of nursing although, again referring to the preface, it is not intended to replace standard texts in bacteriology.

ELLA BEST, R.N.,
Chicago, Ill.

OUTLINES OF INTERNAL MEDICINE FOR
THE USE OF NURSES AND JUNIOR
MEDICAL STUDENTS. By Clifford
Bailey Farr, A.M., M.D. Fourth

and Revised Edition. 377 pages. Illustrated. Lea and Febiger, Philadelphia. Price, \$2.75.

In the fourth edition of this book the author presents a very complete and up-to-date work. As is stated in the preface, this text is intended to supply the basis for a systematic course in medicine for nurses and, in addition, to serve as a work of reference.

The material is uniformly organized, the diseases being classified according to the systems affected. There are ten "Parts." Each part is subdivided into chapters, according to the amount and variety of material presented. Every chapter is preceded by a topical outline of the contents in sequence.

Nervous and mental diseases are considered in the first three chapters which comprise Part One. The first chapter is devoted to "General Considerations"; the second, to mental and functional diseases; and the third to the organic diseases of the nervous system. Eight parts are arranged in like manner. Part Nine deals with disorders due to poisons and physical causes—while Part Ten covers infections and parasitic diseases.

In presenting the subject matter, a general explanation and description of the nature of the disease is given, emphasis being placed upon the etiology, general symptoms and treatment.

In describing symptoms, in several instances, examples and comparisons of different types of disorders have been employed as illustrations. It seems that there is danger here in confusing the student by using references which may be unfamiliar. Since, in some instances, the important facts are not entirely distinguishable from the

unimportant, without guidance the young student may fail to obtain a clear mental picture of the actual condition.

Many of the advanced medical nursing procedures are described in detail, with excellent illustrations.

As a reference, this book should prove a valuable addition to the library of the student nurse.

KATHLEEN C. PARKS, R.N.,
Boston.

HYGIENE FOR PROBATIONER NURSES.

By D. K. Graham, S.R.N. Second Edition. 79 pages. Poor Law Publications, Limited, London. Price, 2/6.

Formerly, in considering hygiene, we thought of the individual. The hygiene of the present day has broadened and has as its foundation all of the basic sciences as related to the wellbeing of not only one man, but all men, with their surroundings. In a word, it is the science of keeping well men well.

Hygiene for Probationer Nurses is a small book of only 75 pages, written primarily for English nurses, but it contains well presented material which anyone could use to advantage. Few scientifically stated laws, so terrifying to young students, are used, but the many principles which explanation and time will fix firmly in their minds are outlined. Those things which are necessary to man's well-being; namely, air, food, water, light, clothing and good habit formation are all discussed. It is to be regretted that the author has given such a minimum of space to the principles of personal hygiene in her great zeal to portray those all-important factors underlying public hygiene. The last chapter is devoted to a series of

miscellaneous questions, such as people are asking every day, with the answers, in clear, concise form.

As a book for teaching purposes, it should prove excellent. It is concise, well outlined, and gives incentive for further study. The foot-notes, giving information concerning lantern slides, posters, etc., for specific lectures should be a great help to one teaching in England.

For the pupil who requires a classified portrayal of principles, as a basis for more extensive study, it is a book very well worth while; and this fact being so, it has fulfilled the author's aim as stated in the preface, namely, to aid the nurse in her preparation for state examinations.

EMILY BELLE KIMPLE, R.N., B.S.,
Philadelphia, Pa.

MANUAL FOR DIABETICS. By Gladys L. Boyd, M.D., and Marion D. Stal-smith. 90 pages. Funk and Wagnalls Company, New York. Price, \$1.50.

The Manual for Diabetics is a comprehensive medical work, simply told, so that it may be understood by all diabetic patients. It is particularly useful for those receiving insulin treatment, since it gives the technic of its administration, the dangers of overdosage, and proper precautionary measures.

Methods are given for daily urine tests, which will help keep the patient informed of his condition.

A chapter is devoted to the complications of diabetes. This may serve as a first aid until the doctor can be consulted.

Insulin has not done away with the

necessity of watching the diet in diabetes, though it has given the patient a more liberal food allowance and more normal meals. He must know the value of the food he eats, how to measure and weigh them, how to prepare them, and how to regulate his diet.

All these facts are well explained in suitable chapters which can be readily understood by the diabetic. Tables of food values are given, and these are further explained by a chapter on menu planning. Many recipes are given which are most useful, and from which attractive and palatable menus may be prepared.

Because of its simplicity and everyday language, the *Manual for Diabetics* may well be recommended for all classes of diabetic patients.

MARGARET E. KELLY,
Diabetic Dietitian,
NELLIE I. MATHER, R.N.,
Head Nurse of Diabetic,
Clifton Springs, N. Y.

MANUAL OF PSYCHIATRY FOR THE MEDICAL STUDENT AND GENERAL PRACTITIONER. By Paul E. Bowers, M.D. 365 pages. W. B. Saunders Company, Philadelphia. Price, \$3.50.

This recent book on Psychiatry will no doubt meet the needs of the student and the physician who are seeking definite, accurate, and concise information on the various types of mental diseases and disorders, for it is a broad, scientific and orderly arrangement of the facts of psychiatry.

In his psychological introduction, the author gives a very clear, simple, and satisfactory statement of the essential processes of the mind, from the most elementary facts of sensation and the

intermediate processes to the highest activities of mental life. We feel the average student will have a far better grasp of the psychological processes involved in human thought, emotion and volition after reading this short introductory chapter, than he usually gets from much more pretentious volumes on the subject.

The chapter on symptoms of mental disorders is worthy of comment, because of the splendid method of discussion. It follows the order of classification outlined in the introductory chapter, which gives an opportunity to correlate the normal and abnormal in such a way that a better understanding of the two subjects is obtained, than by the usual method of discussing the symptoms of diseases. It means much more to the student to study symptoms in their relation to the disorders of intellection, of emotion and of volition, as such, than to study symptoms as a single factor without any reference to the special function of mind which is deranged.

The most striking feature of the book is the systematic, and logical arrangement of facts. This important factor makes it very valuable as a reference book. Each type of mental disease or disorder is discussed according to a well defined plan, and one well worth noting.

Throughout the volume the author adheres consistently to a definite, coherent and logical method of presentation which serves to stimulate the interest of the student and to fix the great, underlying principles of the science more securely in the mind. To appreciate at their just value the admirable features of the book, one must read it; but perhaps a summary statement may serve as an indication of the splendid

presentation. The following order of treatment is found throughout the book: a clear and concise definition, the etiology, the pathology both gross and microscopic, followed by a careful description of the mental and physical symptoms, the course and prognosis of the disease with a short description of the outstanding factors which make clear the reasons for the diagnosis. The finale of the discussion of the various diseases is the treatment advocated for the special symptoms indicated in that psychosis.

It is obvious that an adherence to such an arrangement throughout will facilitate study and will also be a very effective means of arousing and maintaining interest. For these reasons this book is a most satisfactory type for a text in schools of psychiatric nursing, and it should be on the reference shelf of every library in general hospital schools of nursing.

MAY KENNEDY, B.S., R.N.,
Chicago, Ill.

BAEDEKER'S GUIDES: Handbooks for Travellers. By Karl Baedeker. With Maps and Plans. Charles Scribner's Sons, New York City.

For years, these "little red books" have been a familiar sight in Europe. They cover Great Britain, France, Germany, Italy, Austria, Hungary, the Low Countries, Russia, Spain and Portugal, the Scandinavian countries, and Switzerland. Charles Scribner's Sons, in whose hands these books now are, have been getting out new editions as rapidly as might be, having already placed on the market the following recent editions: London, 1923, \$2.75; Paris and Its Environs, 1924, \$3.50; Switzerland,

1922, \$4; Berlin and Its Environs, 1923, \$1.60.

INFECTION, IMMUNITY AND INFLAMMATION: A Study of the Phenomena of Hypersensitiveness and Tolerance, and Their Relationship to the Clinical Study, Prophylaxis, and Treatment of Disease. By Fraser B. Gurd, M.D. 321 pages. The C. V. Mosby Company, St. Louis. Price, \$5.

"Anaphylaxis constitutes the first stage in the immunologic reaction, and although, under very exceptional circumstances, it may constitute a danger to the life of the animal or individual, it serves a useful purpose in that, in consequence of hypersensitiveness of the tissues to the complex protein molecules which constitute bacteria, the bacterial cell bodies are immediately recognized by the tissues as irritants."

This is the thesis which Doctor Gurd offers, emphasizes and reiterates in constantly varying forms throughout his monograph of 325 pages. The subject appears at first sight to be quite theoretic and abstruse, but in the hands of Doctor Gurd the obscurities are smoothed out, the technical difficulties disappear and a volume is produced which an intelligent layman would find comprehensible and instructive. The scope of the work cannot be represented here by abstracts but some of the chapters which seem especially attractive as well as necessary to the practicing physician are those on "Immunity and Immunization," "General Principles of Acquired Immunity," "Anaphylaxis and Hypersensitiveness," "Leucocyte Count in Diagnosis and Prognosis," etc.

The problem of the body's resistance to disease, as it is understood today, is

adequately presented, not from the viewpoint of the laboratory specialist but rather from that of the practising surgeon which adds much to its general readability without detracting at all from its scientific value.

The historical summaries add greatly to the interest which the enthusiasm of the writer transmits to the reader.

The concluding paragraph is one of vital and far-reaching significance. The author states that "the essential reason for the incision and evacuation of abscesses, not complicated by the presence of interstitial tension, is to provide for the removal of pus, necrotic tissue and refuse. Obviously therefore the incision need not be larger than the adequate removal of the foreign body requires and also obviously when the foreign bodies and necrotic elements have been removed there is little to be gained by inserting other substances, like drains, whose very presence irritates the tissues." From this the author postulates that if interstitial tension be absent and all pus and necrotic tissue have been discharged, drainage is unnecessary and commonly produces harm.

This is a natural and logical deduction from the premises. It is wholly plausible also if it be not carried too far, *but* the operator must be extremely sure and well fortified in his opinion that all the pus pockets and the necrotic elements have been definitely evacuated.

CHARLES B. REED, M.D.,
Chicago, Ill.

OCCUPATIONAL THERAPY FOR THE
MENTALLY AND NERVOUSLY ILL. By
Louis J. Hass. Illustrated. 409

pages. Illustrated. The Bruce Publishing Company, Milwaukee. Price, \$6.

The book has great value for the occupational therapist and should be an asset to the libraries of all hospitals, whether for the care of mental and nervous diseases or general hospitals. It contains many practical suggestions, so clearly and adequately illustrated that either physicians, nurses or occupational therapists may find in it valuable suggestions for work which may be adapted to the "special case." It also contains a bibliography of craft books useful in occupational therapy.

The book is most informative, is very practical, and represents progressive thought along the lines of the newer conception of social medicine. Alike in content and appearance it leaves little to be desired.

Those who have been fortunate enough to visit the Men's Occupational Building at Bloomingdale Hospital will deeply appreciate the "Introductory Note" by William L. Russell, M.D., who points out that Mr. Haas, the author, has built up a well-organized department from a meagre foundation, that he has equipped a new building and has devised methods and equipment for dealing with the problems presented. It is this very aspect of the book that creates its greatest value, for the author offers neither theory, project nor equipment that has not been tried out under his own painstaking eye. In his preface he calls attention to the fact that it has been his desire to furnish specific data and he has admirably accomplished this result.

In Chapter 12, the title of which is *The Difference Between Therapeutic*

and Misapplied Occupation, the descriptive narrative of patients who were benefited by proper methods in the application of the "work cure" is unusually good. It shows how often it is difficult to secure desired results and with what a high degree of patience it is necessary to proceed.

The carefully worked out steps in several crafts presented should recommend the book also as a text book for occupational therapists.

ELEANOR CLARKE SLAGLE,
New York City.

WE AND OUR HEALTH. Book III. By E. George Payne, Ph.D. 192 pages. Profusely Illustrated. The American Viewpoint Society, Inc.

"The emphasis in Book III of 'We and Our Health' is distinctly different from that in Books I and II. The change of emphasis is designed to meet the new psychological and social needs of boys and girls at this period of their growth and development. In Books I and II the chief emphasis was placed upon the personal health needs of children, with the idea of developing health habits, primarily, with appropriate knowledge and attitude. In Book III, the main emphasis has been placed upon community health and safety, with the aim of making boys and girls conscious of their social and civic relations and of leading them consciously to perform their social and civic functions in so far as they relate to health."

BOOKS RECEIVED

AN AFRICAN HOLIDAY. By Richard L. Sutton, M.D. 180 pages. Illustrated. The C. V. Mosby Company, St. Louis. Price, \$2.25.

PRINCIPLES AND PRACTICE OF INFANT FEEDING. By Julius H. Hess, M.D. Third Revised and Enlarged Edition. 496 pages. Illustrated. F. A. Davis Company, Philadelphia. Price, \$4.

GYNAECOLOGY FOR NURSES AND GYNAECOLOGICAL NURSING: Including the Subjects Enumerated, under Gynaecology and Obstetrics, in the "Syllabus of Lectures and Demonstrations for Education and Training in General Nursing," issued by the General Nursing Council. By Comyns Berkeley, M.D. Fourth Edition with additional illustrations by Dr. G. M. Dupuy. 365 pages. The Scientific Press, Ltd., London. Price, 7/6 net.

C. M. B. EXAMINATION QUESTIONS AND MODEL ANSWERS. By the Central Midwives' Board. 159 pages. Second Edition. The Scientific Press, Ltd., London. Price, 1/ net.

ON THE BREAST. By Duncan L. Fitzwilliams, M.D. Illustrated. 440 pages. The C. V. Mosby Company, St. Louis. Price, \$10.

THE TECHNIC OF LOCAL ANESTHESIA. By Arthur E. Hertzler, A.M., M.D., Ph.D. Illustrated. 272 pages. Third Edition. The C. V. Mosby Company, St. Louis. Price, \$5.50.

ELEMENTARY ANATOMY AND PHYSIOLOGY: Including Chapters on Psychology, Biology, Comparative Anatomy and Embryology. By H. Clifford Barclay, M.D. 411 pages. Illustrated. William Wood and Company, New York. Price, \$3.50.

CHILD MARRIAGES. By Mary E. Richmond and Fred S. Hall. 159 pages. Russell Sage Foundation, New York. Price, \$1.50.

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